

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2000 8:00 am
Secretary of State
 08-21-2000 90210 018 ***550.00

DOCUMENT # P-99000041996
 1. Entity Name
SAND PEBBLES BY THE SEA, INC.

Principal Place of Business Mailing Address
327 Franklin St
Hollywood, FL 33019

00080033

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

4. FEI Number 65-0919448 Applied For
 Not Applicable
 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Name Dan Kennedy
 Street Address (P.O. Box Number is Not Acceptable) 1529 Arthur St
 City Hollywood FL Zip Code 33019

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE D Kennedy DATE 8/5/2000
 (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME	<u>Monica McKay</u> <input checked="" type="checkbox"/> Delete
STREET ADDRESS	<u>Director / President / Secretary</u>
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	<u>Dan Kennedy</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<u>Director President</u>
CITY-ST-ZIP	<u>1529 Arthur St</u> <u>Hollywood FL 33019</u>
TITLE NAME	<u>Michael Turk</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<u>Director Secretary</u>
CITY-ST-ZIP	<u>1529 Arthur St</u> <u>Hollywood FL 33019</u>
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: D Kennedy President Date Aug 8, 2000 Daytime Phone # 954-929-5038
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)