

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000042348

1. Entity Name

ELIAS INDUSTRIES, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90120 046 ***150.00

Principal Place of Business

Mailing Address

333 WEST MARION AVENUE
EDGEWATER FL 32132

333 WEST MARION AVENUE
EDGEWATER FL 32132-3574

2. Principal Place of Business

1500 Airway Circle

3. Mailing Address

1500 Airway Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

New Smyrna Beach, FL

City & State

New Smyrna Beach, FL

Zip

32168

Country

USA

Zip

32168

Country

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROSS, WILLIAM L JR
221 NORTH CAUSEWAY
NEW SMYRNA BEACH FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

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 PD
NAME KAYAT, ROBERT E
STREET ADDRESS 333 WEST MARION AVENUE, #15
CITY-ST-ZIP EDGEWATER FL 32132 ☐ Delete

TITLE VPST
NAME KAYAT, ROBERT A
STREET ADDRESS 2006 DUNE CIRCLE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE D
NAME KAYAT, ROBERT A
STREET ADDRESS 2006 DUNE CIRCLE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Kayat, Robert E
STREET ADDRESS 1500 Airway Circle
CITY-ST-ZIP New Smyrna Beach, FL 32168 ☒ Change ☐ Addition

TITLE VPST
NAME Kayat, Robert A.
STREET ADDRESS 1500 Airway Circle
CITY-ST-ZIP New Smyrna Beach, FL 32168 ☒ Change ☐ Addition

TITLE D
NAME Kayat, Robert A.
STREET ADDRESS 1500 Airway Circle
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Robert A. Kayat
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00
Date

904-424-7333
Daytime Phone #

CR2E034 (9/99)