

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 13, 2000 8:00 am
Secretary of State

06-13-2000 90003 012 ***550.00

DOCUMENT # P99000047893 ✓

1. Entity Name
SKIBIS, INC.

Principal Place of Business

Mailing Address

3312 NORTHSIDE DR. #501
 KEY WEST FL 33040

3312 NORTHSIDE DR. #501
 KEY WEST FL 33040-7924

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
2831 VISTAMAR ST.

Suite, Apt. #, etc.
2831 VISTAMAR ST.

City & State
FORT LAUDERDALE, FL

City & State
FORT LAUDERDALE, FL

Zip
33304

Country
BROWARD

Zip
33304

Country
BROWARD

4. FEI Number
65-0929779

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

7. Name and Address of New Registered Agent

SCRABIS, RICHARD J
524 MARGARET ST.
KEY WEST FL 33040

Name
RICHARD J. SCRABIS

Street Address (P.O. Box Number is Not Acceptable)

117 NE 12 AVENUE

City
FORT LAUDERDALE

FL

Zip Code
33301

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 *Richard J. Scrabis* **RICHARD J. SCRABIS**

6 - 2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **D SCRABIS, RICHARD**
 STREET ADDRESS **524 MARGARET ST.**
 CITY-ST-ZIP **KEY WEST FL 33040**

TITLE Change Addition
 NAME **D RICHARD J. SCRABIS**
 STREET ADDRESS **117 NE 12 AVENUE**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33301**

TITLE Delete
 NAME **D KOLODZIEJSKI, JEAN-PIERRE**
 STREET ADDRESS **3312 NORTHSIDE DR. #501**
 CITY-ST-ZIP **KEY WEST FL 33040**

TITLE Change Addition

TITLE Delete

TITLE 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: *Richard J. Scrabis* **RICHARD J. SCRABIS**

6 - 2000

954 565 6911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #