

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90116 036 ***150.00

DOCUMENT # P99000049764

1. Entity Name
DOCKSIDENET.COM, INC.

Principal Place of Business

**9700 SO. DIXIE HWY.,STE.900
 MIAMI FL 33156**

Mailing Address

**9700 SO. DIXIE HWY.,STE.900
 MIAMI FL 33156**

2. Principal Place of Business

11750 S.W. 95th Ave

3. Mailing Address

11750 S.W. 95th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number **65-0924414**

Applied For
 Not Applicable

Zip
33176-4251

Country
USA

Zip
33176-4251

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GREENBERG, JEFFREY M
 9700 SO. DIXIE HWY.,STE.900
 MIAMI FL 33156**

Name **William Bagwell**

Street Address (P.O. Box Number is Not Acceptable)
11750 S.W. 95th Ave.

City **Miami** **FL** Zip Code **33176-4251**

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

William Bagwell

01-17-01

(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, 2001 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 **D** ☒ Delete
 NAME **GREENBERG, JEFFREY M**
 STREET ADDRESS **9700 SO. DIXIE HWY.,STE.900**
 CITY-ST-ZIP **MIAMI FL 33156**

TITLE **D** ☐ Change ☒ Addition
 NAME **William Bagwell**
 STREET ADDRESS **11750 S.W. 95th Ave.**
 CITY-ST-ZIP **Miami FL 33176-4251**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Bagwell

Date

Daytime Phone #

1-17-01 (800)817-0454

CR2E034 (10/00)