

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 25, 2000 8:00 am
Secretary of State
 08-25-2000 90002 044 ***150.00

DOCUMENT # P99000054737

1. Entity Name
SERRA'S SHELLS AND MORE, INC.

Principal Place of Business
5741 SOUTH A1A
ST. AUGUSTINE BEACH FL 32084

Mailing Address
5741 SOUTH A1A
ST. AUGUSTINE BEACH FL 32084

2. Principal Place of Business
5731 A1A SOUTH
 Suite, Apt. #, etc.

3. Mailing Address
5900 D US 1 SOUTH
 Suite, Apt. #, etc.

City & State
ST. AUGUSTINE, FL
 Zip
32080 Country
USA

City & State
ST. AUGUSTINE, FL
 Zip
32086 Country
USA

4. FEI Number
59-3586304

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SERRA, ANN
5741 SOUTH A1A
ST. AUGUSTINE BEACH FL 32084

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
5731 A-1-A South
 City **St Augustine** **FL** Zip Code **32080**

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **D** ☐ Delete
 NAME **SERRA, ANN**
 STREET ADDRESS **5900 D. U.S. 1 SOUTH**
 CITY-ST-ZIP **ST. AUGUSTINE BEACH FL 32086**

TITLE **D** ☐ Delete
 NAME **SERRA, SEBASTIAN**
 STREET ADDRESS **5900 D. U.S. 1 SOUTH**
 CITY-ST-ZIP **ST. AUGUSTINE BEACH FL 32086**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/D** ☒ Change ☒ Addition
 NAME
 STREET ADDRESS **ST AUGUSTINE, FL 32086**
 CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **ST AUGUSTINE, FL 32086**
 CITY-ST-ZIP

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

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

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 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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: **Signature Prepared**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # **904-797-5099**

CR2E034 (5/00)

Attachment
DA# 0990000
0008/157

KATHERINE HARRIS
SECRETARY OF STATE,

THIS LETTER IS IN REFERENCE TO
THE CORPORATION TAX NOTICE I RECEIVED.
I RECEIVED A SECOND NOTICE, BUT NEVER
A FIRST NOTICE. I AM A NEW BUSINESS
OWNER AND WAS UNAWARE OF THIS TAX.
I CALLED THE TOLL FREE NUMBER AND
SPOKE WITH A WOMAN ABOUT MY PROBLEM.
SHE SAID TO WRITE YOU A LETTER ABOUT
THIS AND TO SEND A CHECK FOR \$150.00.

PLEASE LET ME KNOW IF THERE IS
A PROBLEM WITH THIS.

THANK YOU
SINCERELY,

SEBASTIAN A. SERRA, JR.
PRESIDENT OF SERRA'S SHELLS & MORE, INC.