

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055362

1. Entity Name

INTERPRO DISTRIBUTING, INC.

Principal Place of Business

1515 E. BROWARD BLVD., UNIT 322  
FORT LAUDERDALE FL 33301

Mailing Address

1515 E. BROWARD BLVD., UNIT 322  
FORT LAUDERDALE FL 33301-2182

See below

See below

2. Principal Place of Business

4305 NE. 21<sup>ST</sup> AVE.

3. Mailing Address

SAME

Suite, Apt. #, etc.

# 6

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, Florida

City & State

4. FEI Number

05-0374542

Applied For

Not Applicable

Zip

33308

Country

Broward

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES INC.  
941 FOURTH ST., #200  
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

JOANN LOMBARDI

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

4305 NE. 21<sup>ST</sup> AVE. Apt. 6

City

Ft. Lauderdale

State

Florida

Zip Code

33308

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

*JOANN LOMBARDI*

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

(NOTE: Registered Agent signature required when reinstating)

4-24-00

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	D, P	<input type="checkbox"/> Delete
NAME	LOMBARDI, JOANN	
STREET ADDRESS	1515 E. BROWARD BLVD., UNIT 322	4305 NE. 21 <sup>ST</sup> AVE
CITY-STATE-ZIP	FORT LAUDERDALE FL 33301	APT. 6 FT. LAUD. FL 33308
TITLE	D, S. T.	<input type="checkbox"/> Delete
NAME	KING, PETER C	
STREET ADDRESS	1515 E. BROWARD BLVD., UNIT 322	SAME AS
CITY-STATE-ZIP	FORT LAUDERDALE FL 33301	ABOVE
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-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:

*JOANN LOMBARDI*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-25-00

**FILED**  
**May 10, 2000 8:00 am**  
**Secretary of State**

05-10-2000 90049 001 \*\*\*150.00

05-10-2000 90049 002 \*\*\*\*\*8.75

12904



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)