

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000055599

1. Entity Name

S. H. DESIGN, INC.

FILED
Feb 17, 2000 8:00 am
Secretary of State

02-17-2000 90084 022 ***150.00

Principal Place of Business

Mailing Address

~~1840 WEST 49TH ST - STE 605~~
~~HALEAH FL 33012~~

~~1840 WEST 49TH ST - STE 605~~
~~HALEAH FL 33012 2050~~

2. Principal Place of Business

1840 WEST 49 ST #404

3. Mailing Address

1840 WEST 49 ST #404

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HALEAH, FL

City & State

HALEAH FL

4. FEI Number

65-0928104

Applied For

Not Applicable

Zip

33012

Country

Zip

33012

Country

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

LEVY, SERGIO H

~~1840 WEST 49TH ST - STE 605~~
~~HALEAH FL 33012~~

Name

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

1840 WEST 49 ST - STE #404

City

HALEAH

FL

Zip Code

33012

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS LEVY, SERGIO H
CITY-ST-ZIP ~~1840 NE 192 ST - APT 300~~
~~HALEAH FL 33012~~

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1000 ISLAND BLVD. APT. #201
CITY-ST-ZIP AVENTURA, FL. 33160

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: SERGIO H. LEVY PRESIDENT

Date

Daytime Phone #

CR2E034 (9/99)