

2000 UNIFORM BUSINESS REPORT (UBR)

8/

FILED
Sep 06, 2000 8:00 am
Secretary of State

08-16-2000 90002 024 ***150.00

DOCUMENT # P99000066104

1. Entity Name

PACIFIC PALM HOTEL & RESORT INC.



Principal Place of Business

Mailing Address

8826 C Coral Palm Court
 Kissimmee, FL
 34747

PO Box 47001
 Celebration, FL
 34747

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

Country

Zip

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

CHIN, DAVID

PO Box 47001
 Celebration, FL
 34747

Name

DAVID CHIN

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

8826 C CORAL PALM COURT

City

KISSIMMEE

FL

Zip Code
 34747

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 NAME STREET ADDRESS CITY-ST-ZIP	Chin, David President & director PO Box 47001 Celebration, FL 34747	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	8826	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1st MAY 2000 407-397-7070

Date

Daytime Phone #

CR2E034 (9/99)

Attachment DOC# P99000066104

Michael G. Margio, C.P.A., P.A.

309571

Phone (407) 847-8088
Fax (407) 847-6235

Certified Public Accountant
200 East Monument Avenue, Suite C
Kissimmee, Florida 34741

5/30/00

Annual Reports Filing
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Pacific Palm Hotel & Resort Inc-
#P99000066104
Year 2000

Dear Sir/Madam:

Please find enclosed a Year 2000 corporate annual report for the above corporation. Also find enclosed a check for \$150.00. Please waive the fee of \$400.00 for the corporation as we overlooked sending the amount on time. I am sure that you expect these to be sent on time and you are right to expect this. However through a misscommunication and busy tax season it was overlooked until now. We apologize for the inconvenience and ask you to please waive the additional \$400.00 fee in this case and accept the usual \$150.00 payment. Thank you in advance for your time and consideration in this matter.

Sincerely,

Michael G. Margio
Michael G. Margio, C.P.A.

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JUNE 1, 2000