

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000066643

1. Entity Name

HORIZON TOTAL TURN, INCORPORATED

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90148 004 ***150.00

Principal Place of Business

12369 157TH ST. NORTH
JUPITER FL 33478

Mailing Address

12369 157TH ST. NORTH
JUPITER FL 33478-6663

2. Principal Place of Business

6054 HEATHER STREET

3. Mailing Address

6054 HEATHER STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
JUPITER, FL

City & State
JUPITER, FL

4. FEI Number
65-0937537

Applied For
Not Applicable

Zip
33458

Country

Zip
33458

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

SEMICH, RONALD A
12369 157TH ST. NORTH
JUPITER FL 33478

Name
ROBERT PEREIRA

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

6054 HEATHER STREET

City
JUPITER

FL

Zip Code
33458

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 **X ROBERT PEREIRA REGISTERED AGENT**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
REGISTERED AGENT
RONALD SEMICH
12369 157 ST NORTH
JUPITER, FL 33478 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
RONALD SEMICH
12369 157 ST NORTH
JUPITER, FL 33478 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-21-00 (561) 3291765

CR2E034 (9/99)