

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000067053**

1. Entity Name

THENUMBER.NET, INC.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2500 HOLLYWOOD BLVD., STE. 215
HOLLYWOOD FL 33020

Mailing Address

2500 HOLLYWOOD BLVD., STE. 215
HOLLYWOOD FL 33020-6615

2. Principal Place of Business

2835 Hollywood Blvd
Suite, Apt., etc.
2nd floor

City & State

Hollywood, FL

Zip

33020

Country

USA

3. Mailing Address

2835 Hollywood Blvd
Suite, Apt., etc.
2nd floor

City & State

Hollywood, FL

Zip

33020

Country

USA

REINSTATEMENT

4. FEI Number

48380 65-0855576

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

MUNIZ, DAVID

2500 HOLLYWOOD BLVD., STE. 215
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name
DAVID MUNIZ

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

2835 Hollywood Blvd and floor

City
Hollywood

FL

Zip Code

33020

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, if applicable.

CEO DAVID MUNIZ

(NOTE: Registered Agent signature required when reinstating)

8/31/00

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEES \$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
David MUNIZ CEO
2835 Hollywood Blvd and floor
Hollywood, FL 33020☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400003497304
-12/12/00--01071--006
****600.00 ****600.00☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ AdditionTITLE
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

DAVID MUNIZ 8/31/00 854920-3666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #