2000 UNIFORM BUSINESS REPORT (UBR)

7/2

FILED
Aug 17, 2000 8:00 am
Secretary of State
07-21-2000 90002 048 ***150.00

DOCUMENT # P99000067712

1. Entity Name

FREDA P CORP.

R

Principal Place of Business	Mailing Address
2200 S. OCEAN LANE FORT LAUDERDALE FL 33316	2200 S. OCEAN LANE FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Ship's Galley.	3. Mailing Address: 2100 S. Ocean Lane
Suite, Apt. #, etc.: 2100 S. Ocean Lane	Suite, Apt. #, etc.
City & State: Ft Lauderdale fla	City & State: Ft Lauderdale fla.
Zip: 33316 / Country	Zip: 33316. / Country

4. FEI Number: 65-0934253 ☐ Applied For ☐ Not Applicable

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
PUMO, FREDA 2200 S. OCEAN LANE FORT LAUDERDALE FL 33316	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
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	D PUMO, FREDA 242 NE 1ST ST. DANIA FL 33004	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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 7-8-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment
DH:P99000067DIF
[redacted]
10708

To the Dept of Corporations
Due to the FACT that
I never RECIVED A Notice
to PAY this Bill $150.00
On July 8th I RECIVED a
SECOND Notice it Seem
that My MAIL is not
coming to 2100 S.OCEAN
LANE Ft. LAUDERDALE
33316. PLEASE let me
know wht needs to be
done to corect this

Your Truly

Freda Rumo