

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2000 8:00 am
Secretary of State
 08-11-2000 90092 043 ***550.00

DOCUMENT # P99000068567

1. Entity Name
ORANJE CONSULTING, INC.

Principal Place of Business
**6251 PALM TRACE LANDINGS DRIVE
 APT. 320
 DAVIE FL 33314**

Mailing Address
**6251 PALM TRACE LANDINGS DRIVE
 APT. 320
 DAVIE FL 33314**

2. Principal Place of Business
2506 Tortugas Ln.
 Suite, Apt. #, etc.

3. Mailing Address
2506 Tortugas Ln.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Ft Lauderdale FL
 Zip
33312
 Country
USA

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Ft Lauderdale
 Zip
33312
 Country
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4. FEI Number
65-0935648
☒ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**VAN EEK, JEFF
 6251 PALM TRACE LANDINGS DRIVE
 APT. 320
 DAVIE FL 33314**

7. Name and Address of New Registered Agent

Name
Jeff van Eek
 Street Address (P.O. Box Number is Not Acceptable)
2506 Tortugas Ln.
 City
Ft. Lauderdale FL Zip Code
33312

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

(NOTE: Registered Agent signature required when reinstating)

8-7-2000
 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 \$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

TITLE
D ☐ Delete
 NAME
VAN EEK, JEFF
 STREET ADDRESS
6251 PALM TRACE LANDINGS DR., APT. 320
 CITY-ST-ZIP
DAVIE FL 33314

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME ☒ Change ☐ Addition
 STREET ADDRESS
2506 Tortugas Ln.
 CITY-ST-ZIP
Ft Lauderdale, FL 33312

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

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

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

TITLE
 NAME ☐ Change ☐ Addition
 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-7-00
 Date

954-584-7302
 Daytime Phone #

CR2E034 (5/00)