

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000071632

1. Entity Name

ISLA VERDE HOLDINGS, INC.

FILED
Jun 14, 2000 8:00 am
Secretary of State

05-15-2000 90213 010 ***150.00

Principal Place of Business
111 West Fortune Street
Tampa, Florida 33602

Mailing Address
111 West Fortune Street
Tampa, Florida 33602

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3613151

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CALLEN, DAVID H
111 West Fortune Street
Tampa, FL. 33602

7. Name and Address of New Registered Agent

Name

Robinson Callen

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

2201 Collins Avenue

City

Miami Beach

FL

Zip Code

33139

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

TITLE **D**
NAME **CALLEN, DAVID H**
STREET ADDRESS **111 West Fortune Street**
CITY-ST-ZIP **Tampa, Florida 33602**

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D**
NAME **CALLEN, ROBINSON**
STREET ADDRESS **2201 Collins Avenue**
CITY-ST-ZIP **Miami Beach, Florida 33139**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

Robinson Callen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 585-2866

CR2E034 (9/99)