

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000072767

1. Entity Name

GRASSI ENTERPRISES, INC.

FILED
Aug 31, 2000 8:00 am
Secretary of State

08-31-2000 90113 047 ***150.00

Principal Place of Business

222 N. FEDERAL HWY., SUITE 104
DEERFIELD BCH FL 33441

Mailing Address

222 N. FEDERAL HWY., SUITE 104
DEERFIELD BCH FL 33441

2. Principal Place of Business

1001 SE 12th Terrace

Suite, Apt. #, etc.

Deerfield Beach

City & State

Florida

Zip

33441

Country

USA

3. Mailing Address

1001 SE 12th Terrace

Suite, Apt. #, etc.

Deerfield Beach, Florida

City & State

Zip

33441

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0937669

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRASSI, JOHN

222 N. FEDERAL HWY., SUITE 104
DEERFIELD BCH FL 33441

7. Name and Address of New Registered Agent

Name

Mike Bongiovanni

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

Greentree Financial, 1000 West

McNab Road, Ste #107

City

Pompano Beach

FL

Zip Code

33069

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

August 23, 2000

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE \$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	PVST	Delete
NAME	GRASSI, JOHN	
STREET ADDRESS	222 N. FEDERAL HWY., SUITE 104	
CITY-ST-ZIP	DEERFIELD BCH FL 33441	
TITLE	D	Delete
NAME	GRASSI, JOHN	
STREET ADDRESS	222 N. FEDERAL HWY., SUITE 104	
CITY-ST-ZIP	DEERFIELD BCH FL 33441	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 23

Date

954-418-0867

Daytime Phone #

CR2E034 (5/00)

DOC # P99000072767

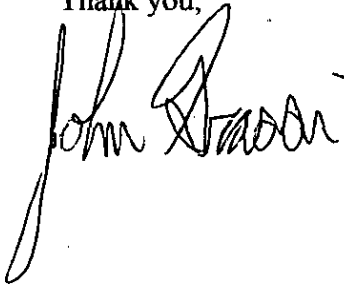
A0074852

August 29, 2000

To Whom It May Concern:

I called earlier last month about this UBR advising that I never received the first one and your office advised me to put a note in with this application stating that and putting a check for \$150.00. so that is what I am doing. If there are any other problems – please advise to the new mailing address in the UBR or you may call me at 954-418-0887.

Thank you,

A handwritten signature in cursive script, appearing to read "John G. Mason".