

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000075320

1. Entity Name

IMPACT SERVICES INC.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90153 003 ***150.00

Principal Place of Business

1619 S. ANDREWS AVE.
 FORT LAUDERDALE FL 33316

Mailing Address

1619 S. ANDREWS AVE.
 FORT LAUDERDALE FL 33316-2509

2. Principal Place of Business

5631 NW 27 CT.

Suite, Apt. #, etc.

3. Mailing Address

1701 E. ATLANTIC BLVD.

Suite, Apt. #, etc.

SUITE #2



DO NOT WRITE IN THIS SPACE

City & State

LAUDERHILL, FL

City & State

POMPANO BEACH, FL

4. FEI Number

65-0945035

Applied For

Not Applicable

Zip 33313

Country

USA

Zip

33060

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVY, YUVAL
 1619 S. ANDREWS AVE.
 FORT LAUDERDALE FL 33316

7. Name and Address of New Registered Agent

Name

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

5492 FOX HOLLOW DR.

City

BOCA RATON

FL

Zip Code

33486

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 ☐ Delete
 NAME LEVY, YUVAL
 STREET ADDRESS 1619 S. ANDREWS AVE.
 CITY-ST-ZIP FORT LAUDERDALE FL 33316

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 5492 FOX HOLLOW DR.
 CITY-ST-ZIP BOCA RATON, FL 33486

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

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

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

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

TITLE ☐ Change ☐ 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:

YUVAL LEVY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

(954) 975-3339

Daytime Phone #

CE 014 19/993