

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000077822

1. Entity Name

DANOVISION PRODUCTIONS COMPANY

FILED

Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90008 038 ***150.00

Principal Place of Business

Mailing Address

4806 POINSETTIA AVENUE, #4
WEST PALM BEACH FL 33407

4806 POINSETTIA AVENUE, #4
WEST PALM BEACH FL 33407-2956

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

65-0944632

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

SMITH, ELIZABETH J
4806 POINSETTIA AVENUE, #4
WEST PALM BEACH FL 33407

Name: Daniel Gary Vanlandschoot
Street Address (P.O. Box Number is Not Acceptable): 4806 Poinsettia Ave #4
City: West Palm Beach FL Zip Code: 33407

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: DAN VANLANDSCHOOT

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

DAN VANLANDSCHOOT 2/1/00 561 694 1040

Date

Daytime Phone #

CR2E034 (9/99)