

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000078711

1. Entity Name

Lang Woodcraft, Inc.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90015 049 ***150.00

Principal Place of Business

Mailing Address

4711 Madison St.
Hollywood, FL 33021

2. Principal Place of Business

4711 Madison St

3. Mailing Address

4711 Madison St

Suite, Apt. #, etc.

#

Suite, Apt. #, etc.

City & State
Hollywood, FL

City & State
Hollywood, FL

4. FEI Number

65-0942970

Applied For

Not Applicable

Zip

Country

Broward

Zip

Country

BROWARD

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

David Lang
4711 Madison St.
Hollywood, FL 33021

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
David Lang
4711 Madison St., Hollywood, FL 33021

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P., Secy. Treasurer
Wendy Lang
4711 Madison St., Hollywood, FL 33021

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ 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:

Wendy Lang, WENDY LANG, V.P.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00 954.474-9700
Date Daytime Phone # X101

CR2E034 (9/99)