

4/28.

FILED
May 25, 2001 8:00 am
Secretary of State

04-28-2001 90052 025 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000078902

1. Entity Name

POPULARBIZ.COM, INC.

Principal Place of Business

Mailing Address

~~3200 N FEDERAL HIGHWAY~~
~~#104~~
~~BOCA RATON FL 33431~~

~~3200 N FEDERAL HIGHWAY~~
~~#104~~
~~BOCA RATON FL 33431~~

2. Principal Place of Business

6465 Marbletree Ln

3. Mailing Address

6465 Marbletree Ln

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Lake



DO NOT WRITE IN THIS SPACE

City & State

Lake Worth, FL

City & State

Lake Worth, FL

4. FEI Number

65-0344478

Applied For

Not Applicable

Zip

33467

Country

USA

Zip

33467

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

KESKINER, HALUK
 9620 CAROUSEL CIRCLE S.
 BOCA RATON FL 33434

7. Name and Address of New Registered Agent

Name

Ercan Sen

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

6465 Marbletree Ln

City

Lake Worth

FL

Zip Code

33467

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)

5/22/01

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, 2001 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	PF	<input checked="" type="checkbox"/> Delete
NAME	KESKINER, HALUK	
STREET ADDRESS	9620 CAROUSEL CIRCLE S.	
CITY-ST-ZIP	BOCA RATON FL 33434	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KARAMAN, YAVUZ	
STREET ADDRESS	9251 LAKE SERENA DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	SEN, ERCAN	
STREET ADDRESS	1840-A LINTON LAKE DRIVE	
CITY-ST-ZIP	DELRAY BEACH FL 33445	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ERCAN, SEN	
STREET ADDRESS	6465 MARBLETREE LN	
CITY-ST-ZIP	LAKE WORTH FL 33467	
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	P/C/T/S	<input checked="" 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:

Ercan Sen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/01

Date

561-417-5422

Daytime Phone #

CR2E034 (10/00)