

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90176 008 ***150.00

DOCUMENT # P99000082066

1. Entity Name

PINNACLE RENOVATIONS AND DESIGN, INC.

Principal Place of Business

Mailing Address

10704 WILES RD.
 CORAL SPRINGS FL 33076

10704 WILES RD.
 CORAL SPRINGS FL 33065-2433

2. Principal Place of Business

3. Mailing Address

3700 N.W. 124 AVE

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

133

City & State

City & State

Coral Springs, FL.

FL

Zip

Country

Zip

Country

33065

FLORIDA

4. FEI Number

☒ Applied For
☐ Not Applied

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

WHITE, ROBERT A
 1401 UNIVERSITY DR.
 CORAL SPRINGS FL 33071

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 PD ☒ Delete
 NAME PREZZEMOLO, MARK
 STREET ADDRESS 10704 WILES RD.
 CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE VD ☐ Delete
 NAME NELSON, JAY
 STREET ADDRESS 10704 WILES RD.
 CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE SD ☒ Delete
 NAME AVITABLE, LEE
 STREET ADDRESS 10704 WILES RD.
 CITY-ST-ZIP CORAL SPRINGS FL 33076

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 ☐ Change ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE PD (P) PRES. ☒ Change ☐ Delete
 NAME ~~ALAN JACQUES~~ NELSON, JACQUES
 STREET ADDRESS 4426 NW 64th ST.
 CITY-ST-ZIP COCONUT CREEK, FL. 33073

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

TITLE V. PRES. (V) ☐ Change ☒ Delete
 NAME LDRENE FEDRANZO
 STREET ADDRESS 8500 NW 14th ST.
 CITY-ST-ZIP CORAL SPRINGS, FL. 33071

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

TITLE ☐ Change ☐ Delete
 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 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

JACQUES NELSON

2/4/2000

(954) 341-3

Daytime Phone #