

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 27, 2000 08:00 AM
Secretary of State****DOCUMENT # P99000083865****1. Entity Name**
DOUBLE HELIX, INC.**Principal Place of Business**

600 NW 7TH TERR

BOCA RATON
33486

FL

Mailing Address

600 NW 7TH TERR

BOCA RATON
33486

FL

2. Principal Place of Business**3. Mailing Address**
600 NW 7TH TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State**City & State**
BOCA RATON

FL

Zip**Country**

33486

Country**4. FEI Number**

65-0950222

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentMARCINIAK REBECA A
600 NW 7TH TERRBOCA RATON
33486

FL

7. Name and Address of New Registered Agent**Name**

MARCINIAK REBECCA A

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

600 NW 7TH TERRACE

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 REBECCA A. MARCINIAK**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

01/27/2000

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 MARCINIAK REBECCA A
STREET ADDRESS 600 NW 7TH TERR
CITY-ST-ZIP BOCA RATON FL 33486**TITLE** D ☐ Delete
NAME MARCINIAK EDWARD L
STREET ADDRESS 600 NW 7TH TERR
CITY-ST-ZIP BOCA RATON FL 33486**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** D ☒ Change ☐ Addition
NAME MARCINIAK REBECCA A
STREET ADDRESS 600 NW 7TH TERRACE
CITY-ST-ZIP BOCA RATON FL 33486**TITLE** D ☒ Change ☐ Addition
NAME MARCINIAK EDWARD L
STREET ADDRESS 600 NW 7TH TERRACE
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**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** Edward L. Marciniak

D 01/27/2000