

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000091499**

1. Entity Name

NEIL BUTWIN ENTERPRISES, INC.**FILED****00 SEP 25 PM 2:44****SECRETARY OF STATE
T 0074662 E FLORIDA**

Principal Place of Business

**7824 SONOMA SPRINGS CIRCLE
SUITE 105
BOYNTON BEACH FL 33463**

Mailing Address

**7824 SONOMA SPRINGS CIRCLE
SUITE 105
BOYNTON BEACH FL 33463**

2. Principal Place of Business

**7299 TONGA CT.
SUITE, APT. #, ETC.
BOYNTON BEACH FL
CITY & STATE**

3. Mailing Address

**7299 TONGA CT.
SUITE, APT. #, ETC.
BOYNTON BEACH FL
CITY & STATE**

4. FEI Number

65-0956006

Applied For

Not Applicable

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

8. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PSD	☐ Delete
NAME	BUTWIN, NEIL	
STREET ADDRESS	7824 SONOMA SPRINGS CIRCLE SUITE 105	
CITY-ST-ZIP	BOYNTON BEACH FL 33463	

TITLE	VTD	☐ Delete
NAME	BUTWIN, SERITA	
STREET ADDRESS	7824 SONOMA SPRINGS CIRCLE SUITE 105	
CITY-ST-ZIP	BOYNTON BEACH FL 33463	

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	PSD	☐ Change ☐ Addition
NAME	BUTWIN, NEIL	
STREET ADDRESS	7299 TONGA CT.	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	

TITLE	VTD	☐ Change ☐ Addition
NAME	BUTWIN, SERITA	
STREET ADDRESS	7299 TONGA CT.	
CITY-ST-ZIP	BOYNTON BEACH FL 33437	

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:

NEIL BUTWIN**8/24/00****701-964-3719**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (5/00)

369-0790