

DOCUMENT # P99000092133

1. Entity Name
CHECKS BY WEB, INC.**FILED**
Feb 13, 2006 08:00 AM
Secretary of StatePrincipal Place of Business
9770 S MILITARY TRL
#380
BOYNTON BEACH, FL 33436 USMailing Address
11271 GOLFRIDGE LANE
BOYNTON BEACH, FL 33437 US

01102006 No Chg-P CR2ED34 (11/05)

DO NOT WRITE IN THIS SPACE4. FEI Number
65-0955062Applied For
Not Applicable5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHWARTZ, LARRY
11271 GOLFRIDGE LANE
BOCA RATON, FL 33487**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees000000433259
02/24/06-80010-014 158.75

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SCHWARTZ, LARRY
STREET ADDRESS	11271 GOLFRIDGE LANE
CITY - ST - ZIP	BOCA RATON, FL 33487
TITLE	VP
NAME	SAX, PEARL
STREET ADDRESS	11271 GOLFRIDGE LANE
CITY - ST - ZIP	BOYNTON BEACH, FL 33437
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Larry Schwartz LARRY SCHWARTZ 1-17-06 561-737-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone