## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** DOCUMENT # P99000093856 Jun 16, 2000 8:00 am 1. Entity Name FREDERIC MONT, INC. **Secretary of State** 05-09-2000 90092 025 \*\*\*150.00 Mailing Address 7809 W. COMMERCIAL BLVD. 7809 W. COMMERCIAL BLVD. TAMARAC FL 33351-4382 TAMARAC FL 33351 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Zip Country \$8.75 Additional Zip Country Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PANKER, FREDERIC M Street Address (P.O. Box Number is Not Acceptable) 7809 W. COMMERCIAL BLVD. TAMARAC FL 33351 Zip Code City 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 algorature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition Change TITLE TITLE Delete PANKER, ELEANOR NAME NAME 2903 VICTORIA CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **COCONUT CREEK FL 33066** ☐ Addition ☐ Change Defeta TITLE PANKER, FREDERIC M NAME NAME STREET ADDRESS STREET ADDRESS 2903 VICTORIA CIRCLE CITY-ST-ZIP CITY-ST-ZIP **COCONUT CREEK FL 33066** Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling does not obtain 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachmen SIGNATURE:

## APPLICATION FOR CHANGE OF NAME

OF

## FRÉDÉRIC MONT, INC.

To change its name to:

F de Mont, Inc.

To be effective May 22, 2000 , per meeting of the Board of Directors, Frederic M. Panker , officer and title to be:

Frederic M. Panker, President.

Frederic M. Panker, President

STATE OF FLORIDA

COUNTY OF BROWARD

Appeared before me on this 22nd day of May undersigned authority, Frederic Panker

,2000, the and placed

signature hereon in my presence for the purposes therein

set forth.

MY COMMISSION

EXPIRES:

George L. Gober Commission # CC 908442 Expires March 23, 2004 Bonded Thru Atlantic Bonding Co., Inc.