

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000094355

1. Entity Name

MALIBU'S OF ROCKLEDGE, INC.

**FILED**  
**Aug 28, 2000 8:00 am**  
**Secretary of State**

08-28-2000 90036 011 \*\*\*150.00

Principal Place of Business

6112 WATERLOO AVE  
 COCOA FL 32927

Mailing Address

6112 WATERLOO AVE  
 COCOA FL 32927

2. Principal Place of Business

165 Barten Blvd  
 Suite, Apt. #, etc.

3. Mailing Address

SAME  
 Suite, Apt. #, etc.

City & State

Rockledge FL

City & State

Rockledge FL

4. FEI Number

59-0369694

Applied For

Not Applicable

Zip

32955

Country

BReward

Zip

32955

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

BEARD, MARYANN  
 6112 WATERLOO AVE  
 COCOA FL 32927

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 NAME STREET ADDRESS CITY - ST - ZIP	D BEARD, MARYANN 6112 WATERLOO AVE COCOA FL 32927	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

**Malibus of Rockledge Inc**

165 Barton Blvd.  
Rockledge, Fl. 32955

Attachment  
D# 09900094355  
DW 81540

August 23, 2000

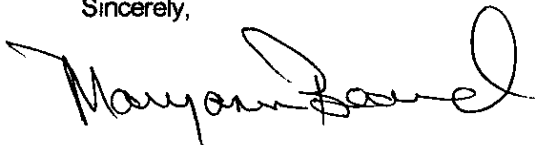
Division of Corporations  
Uniform Business Filing  
PO Box 1500  
Tallahassee, Fl. 32302-1500

Dear Sir or Madam:

The enclosed 2000 uniform business report is the first report that we have received for this filing fee. We were incorporated and began business in January, 2000. The annual filing fee is \$150.00 per your instruction letter. The late charge of \$400.00 is imposed for filing this form late. You have assessed us the late fee even though you were late in providing this document to us.

We are inclosing a check for \$150.00 for the annual filing fee. Please remove the late fee of \$400.00 since it is our first time filing and it is the first notice of filing I have received.

Sincerely,



Maryann Beard  
president