

2000 UNIFORM BUSINESS REPORT (UBR)

71

1053

DOCUMENT # P99000098431

1. Entity Name

BUBBLES 2 GO, INC.

Principal Place of Business

3085 LAKEWOOD CIR.
WESTON FL 33332

Mailing Address

3085 LAKEWOOD CIR.
WESTON FL 33332

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0964719

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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 renewing)

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	PVSD FISBOIN, MOISES 815 FALLING RD. WESTON FL 33326	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FISBOIN, MOISES 815 FALLING WATER RD. WESTON FL 33326	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD H. ORTIZ, EDWIN 815 FALLING WATER RD. WESTON FL 33326	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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 another like empowered.

SIGNATURE:

Signature

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/13/00

Date

Daytime Phone #

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07-19-2000 901 52 045 ***150.00
00 SEP 11 AM 10:11



DO NOT WRITE IN THIS SPACE



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 30, 2000

BUBBLES 2 GO, INC.
3085 LAKEWOOD CIR.
WESTON, FL 33332

SUBJECT: BUBBLES 2 GO, INC.
Ref. Number: P99000098431

Please be advised, we have received your annual report/uniform business report for the above corporation and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following:

The new registered agent must sign accepting the designation.

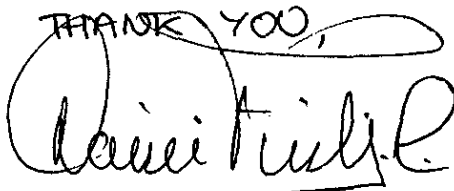
TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Stacy Prather
Document Specialist

Letter Number: 500A00046398

P.S. * EDWIN HORTET IS NO LONGER PART OF THE CORPORATION.
EFFECTIVE DATE: AUGUST 28/00.

THANK YOU,

MOSES FISBOIN
PRESIDENT.