

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098941

1. Entity Name

SPINEUNIVERSE.COM, INCORPORATED

Principal Place of Business

7015 BERACASA WAY, SUITE 201
BOCA RATON FL 33433

Mailing Address

7015 BERACASA WAY, SUITE 201
BOCA RATON FL 33433

2. Principal Place of Business

621 NW 53rd St
Ste 240

3. Mailing Address

621 NW 53rd St
Ste 240

City & State

Boca Raton FL
Zip 33487 Country USA

City & State

Boca Raton FL
Zip 33487 Country USA

4. FEI Number

050969736

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALSER, THOMAS C
7015 BERACASA WAY, SUITE 201
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name: Michael M. Pantori, Jr., CPA
Street Address (P.O. Box Number is Not Acceptable):
c/o Ahearn Jasco & Co.
190 SE 19th Avenue
City: Pompano Beach FL Zip Code: 33060

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

Michael M. Pantori, Jr., CPA Michael M. Pantori, Jr. 7/18/00
(NOTE: Registered Agent signature required when reinstating)

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	D	<input type="checkbox"/> Delete
NAME	EIDELSON, STEWART DR	
STREET ADDRESS	7015 BERACASA WAY, SUITE 201	
CITY-ST-ZIP	BOCA RATON FL 33433	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Eidelson, Stewart Dr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	621 NW 53rd St. Ste 240	
CITY-ST-ZIP	Boca Raton, FL 33487	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Michael M. Pantori, Jr., CPA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/17/00 5619951437
Date Daytime Phone #

FILED
Aug 22, 2000 8:00 am
Secretary of State

07-28-2000 90150 003 ***550.00



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)