

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000102169

1. Entity Name

DELTONA DEVELOPMENT CORPORATION

**FILED**  
**Mar 25, 2000 8:00 am**  
**Secretary of State**

03-25-2000 90003 024 \*\*\*150.00

Principal Place of Business

Mailing Address

7251 S.W. 82ND STREET  
SUITE 29  
MIAMI FL 33143

7251 S.W. 82ND STREET  
SUITE 29  
MIAMI FL 33143

2. Principal Place of Business

6415W 89ct

3. Mailing Address

6415W 89ct

Suite, Apt. #, etc.

House.

Suite, Apt. #, etc.

House

City & State

Miami Fla

City & State

Miami Fla

Zip

33173-3512

Country

Dade

Zip

33173 3512

Country

Dade

4. FEI Number

65-0967933

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, JUAN  
7251 S.W. 82ND STREET  
SUITE 29  
MIAMI FL 33143

7. Name and Address of New Registered Agent

Name

Zayde R Pozo

Street Address (P.O. Box Number is Not Acceptable)

Gables International Plaza

2655 Latrine Rd Penthouse F0

City

Local Gables

FL

Zip Code

33134

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 ☐ Delete  
NAME D  
STREET ADDRESS HERNANDEZ, JUAN  
CITY-ST-ZIP 7251 S.W. 82ND STREET SUITE #29  
MIAMI FL 33143

TITLE ☐ Delete  
NAME D  
STREET ADDRESS GINSBURG, JONAS  
CITY-ST-ZIP 7251 S.W. 82ND STREET SUITE #29  
MIAMI FL 33143

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME J/S  
STREET ADDRESS JUAN R. HERNANDEZ  
CITY-ST-ZIP 6415W 89ct  
MIAMI FL 33173-3512

TITLE ☒ Change ☐ Addition  
NAME P/V  
STREET ADDRESS GINSBURG JONAS  
CITY-ST-ZIP 6415W 89ct  
MIAMI FL 33173-3512

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)