

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000103081

1. Entity Name  
PALM BEACH FINISH CARPENTRY, INC.

Principal Place of Business  
6028 FOREST HILL BLVD., #204  
WEST PALM BEACH FL 33415

Mailing Address  
6028 FOREST HILL BLVD., #204  
WEST PALM BEACH FL 33415

2. Principal Place of Business  
12576 BUCKLAND CTE  
Suite, Apt. #, etc.

3. Mailing Address  
12576 BUCKLAND CT E  
Suite, Apt. #, etc.

City & State  
West Palm Bch. FL.

City & State  
WEST PALM BCH FL.

Zip  
33414

Country

Zip  
33414

Country

4. FEI Number  
650963646

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

BATISTA, JOHNNY  
6028 FOREST HILL BLVD., #204  
WEST PALM BEACH FL 33415

## 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  
BATISTA, JOHNNY  
6028 FOREST HILL BLVD., #204  
WEST PALM BEACH FL 33415 ☐ 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  
☒ Change ☐ Addition  
12576 BUCKLAND CT E  
WEST PALM BEACH FL 33414

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

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 all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/2000

Date

(561) 791-9968

Daytime Phone #

**FILED**  
**Sep 11, 2000 8:00 am**  
**Secretary of State**

09-11-2000 90007 001 \*\*\*550.00  
09-11-2000 90007 002 \*\*\*\*\*5.00  
09-11-2000 90007 003 \*\*\*\*\*8.75



DO NOT WRITE IN THIS SPACE

CR:EO34 (5/00)