

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000105878**

1. Entity Name

SUNSEEKER HOLDINGS, INC.**FILED**
Feb 16, 2001 8:00 am
Secretary of State

02-16-2001 90027 023 ***150.00

Principal Place of Business

**2175 NORTH ANDREWS AVENUE
EXTENSION, UNIT 7
POMPANO BEACH FL 33069**

Mailing Address

**2175 NORTH ANDREWS AVENUE
EXTENSION, UNIT 7
POMPANO BEACH FL 33069****C0022378**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2001 SW 20th Street

3. Mailing Address

200 E. Las Olas Boulevard

Suite, Apt. #, etc.

Bldg B - Bays 105 & 106

Suite, Apt. #, etc.

Suite 1900

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

4. FEI Number

65-0966350

Applied For

Not Applicable

Zip

33315

Country

USA

Zip

33301

Country

USA5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BRINKLEY, W. MICHAEL
200 EAST LAS OLAS BLVD.
SUITE 1800
FT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

Name

W. Michael Brinkley

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

200 E. Las Olas Boulevard**Suite 1900**

City

Fort Lauderdale**FL**Zip Code
33301

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.

W. Michael Brinkley, Registered Agent**2/13/2001**

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, 2001 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
BRINKLEY, W. MICHAEL
200 EAST LAS OLAS BLVD. SUITE 1800
FT LAUDERDALE FL 33301**☐ Delete**1900**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
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CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
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:

W Michael Brinkley, Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**2/13/2001**

Date

954-522-2200

Daytime Phone #

CR2E034 (10/00)

0135557