

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000107713

1. Entity Name

SOUTH FLORIDA BOAT WORKS, INC.

FILED

May 23, 2000 8:00 am
Secretary of State

05-23-2000 90216 027 ***150.00

Principal Place of Business

Mailing Address

218 SE 7TH ST. UNIT 7
HALLANDALE FL 33009

218 SE 7TH ST. UNIT 7
HALLANDALE FL 33009

2. Principal Place of Business

3. Mailing Address

1749 E. Hallandale Bch. Blvd. #204

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Hallandale Bch., FL.

4. FEI Number

52-2206256

Applied For

Not Applicable

Zip

Country

Zip

33009

Country

U.S.

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

LOFFREDO, STEPHEN K
9999 NE 2ND AVE, SUITE 216
MIAMI SHORES FL 33138

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME ERB, JAIME
STREET ADDRESS 2700 NE 135TH ST, APT 46
CITY-ST-ZIP N MIAMI FL 33181 ☐ Delete

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

TITLE VD
NAME TRUDEL, STEPHEN P
STREET ADDRESS 218 SE 7TH ST, UNIT 7
CITY-ST-ZIP HALLANDALE FL 33009 ☐ Delete

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

TITLE SD
NAME DUPRE, ANNETTE L
STREET ADDRESS 218 SE 7TH ST, UNIT 7
CITY-ST-ZIP HALLANDALE FL 33009 ☐ Delete

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

TITLE TD
NAME ERB, SANDRA K
STREET ADDRESS 2700 NE 135TH ST, APT 46
CITY-ST-ZIP N MIAMI FL 33181 ☐ Delete

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

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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

4/29/00 (305) 932-5554

Date

Daytime Phone #

CR: 034 (9/99)