

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000110369

1. Entity Name

ZEROCHAOS.COM, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90078 015 ***150.00

Principal Place of Business

Mailing Address

1411 EDGEWATER DRIVE SUITE 203
ORLANDO FL 32804

1411 EDGEWATER DRIVE SUITE 203
ORLANDO FL 32804

2. Principal Place of Business

111 WEST JEFFERSON ST

3. Mailing Address

111 WEST JEFFERSON ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 100

SUITE 100

City & State

City & State

ORLANDO FL

ORLANDO FL

Zip

Country

Zip

Country

32801

USA

32801

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3613428

Applied For

Not Applicable

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

WHITE, W. GRAHAM
1411 EDGEWATER DRIVE SUITE 203
ORLANDO FL 32804

Name

WILLIAM ROBINSON

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

111 WEST JEFFERSON ST

SUITE 100

City

ORLANDO

FL

Zip Code

32801

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
MARK LOWREY
111 WEST JEFFERSON ST SUITE 100
ORLANDO FL 32804

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
V
DAYNE WILLIAMS
111 WEST JEFFERSON ST SUITE 100
ORLANDO FL 32801

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
P
JOHN RICKY
111 WEST JEFFERSON ST SUITE 100
ORLANDO FL 32801

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
T
JAY WOLIN
111 WEST JEFFERSON ST SUITE 100
ORLANDO FL 32801

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00

Date

407 447 3810

Daytime Phone #

CR2F034 (9/99)