

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S06634

1. Entity Name

GREEN WORLD ENTERPRISES, INC.

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

05-19-2000 90050 011 \*\*\*150.00

Principal Place of Business

Mailing Address

152 S.E. 5TH AVENUE  
DELRAY BEACH FL 33483

152 S.E. 5TH AVENUE  
DELRAY BEACH FL 33483-5205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0220963

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

NIKLAS, AVA J  
559 N.E. 46ST #202  
BOCA RATON FL 33431

Name

Watson, Ava J  
Street Address (P.O. Box Number is Not Acceptable)  
Same

City

Same

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 VP ☐ Delete  
NAME NIKLAS, AVA JOY  
STREET ADDRESS 9557 EL CLAIR RANCE ROAD  
CITY-ST-ZIP BOYNTON BEACH FL

TITLE VP ☒ Change ☐ Addition  
NAME Watson, Ava Joy  
STREET ADDRESS 559 NE 46 St. #202  
CITY-ST-ZIP Boca Raton, FL 33431

TITLE PT ☐ Delete  
NAME NIKLAS, ROBERT H.  
STREET ADDRESS 9557 EL CLAIR RANCH ROAD  
CITY-ST-ZIP BOYNTON BEACH FL

TITLE P.T. ☒ Change ☐ Addition  
NAME Niklas, Robert H.  
STREET ADDRESS 152 SE 5th Ave  
CITY-ST-ZIP Delray Beach, FL 33483

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 19/99