

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2001 8:00 am**  
**Secretary of State**  
 03-29-2001 90408 035 \*\*\*150.00

**DOCUMENT # S21189**

1. Entity Name  
**VERITY ENTERPRISES OF FLORIDA, INC.**

|  |  |
|--|--|
| Principal Place of Business                                  | Mailing Address  |
| 19800 U.S. HIGHWAY #1<br>APT. 301<br>TEQUESTA FL 33469<br>US | 19800 U.S. HIGHWAY #1<br>APT. 301<br>TEQUESTA FL 33469<br>US |

00049316



DO NOT WRITE IN THIS SPACE

|                                |         |                     |         |  |  |  |  |
|--------------------------------|---------|---------------------|---------|--|--|--|--|
| 2. Principal Place of Business |         | 3. Mailing Address  |         | 4. FEI Number <b>65-0238746</b>  |  | Applied For<br><input type="checkbox"/> Not Applicable |  |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |  |  |  |  |
| City & State                   |         | City & State        |         | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |  |  |
| Zip                            | Country | Zip                 | Country |  |  |  |  |

|   |  |   |  |
|---|--|---|--|
| 6. Name and Address of Current Registered Agent                             |  | 7. Name and Address of New Registered Agent   |  |
| VERITY, AUSTIN W.<br>19800 U.S. HIGHWAY #1<br>APT. 301<br>TEQUESTA FL 33469 |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> 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 Austin W. Verity DATE MARCH 24, 2001

Signature, typed or printed name of registered agent and trustee, if applicable. (NOTE: Registered Agent signature required when reinstating)

|   |   |   |
|---|---|---|
| 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/> | <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After MAY 1, 2001 Fee will be \$550.00</b><br><b>Make Check Payable to Department of State</b> | 10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
|---|---|---|

| 11. OFFICERS AND DIRECTORS                     |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|--|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DS</b><br><b>VERITY, AUSTIN W</b><br><b>1750 AUSTRALIAN AVE</b><br><b>RIVIERA BEACH FL</b>     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>DS</b><br><b>VERITY AUSTIN W</b><br><b>19800 U.S. HIGHWAY ONE APT 301</b><br><b>TEQUESTA, FL</b>         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DP</b><br><b>VERITY, DOROTHY H</b><br><b>1750 AUSTRALIAN AVE</b><br><b>RIVIERA BEACH FL</b>    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>DP</b><br><b>VERITY, DOROTHY H</b><br><b>19800 U.S. HIGHWAY ONE APT 301</b><br><b>TEQUESTA, FL</b>       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DV</b><br><b>VERITY, AUSTIN W III</b><br><b>1750 AUSTRALIAN AVE</b><br><b>RIVIERA BEACH FL</b> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>DV</b><br><b>VERITY, AUSTIN W III</b><br><b>208 N. U.S. HIGHWAY ONE- UNIT # 3</b><br><b>TEQUESTA, FL</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DT</b><br><b>REMES, SUSAN</b><br><b>1750 AUSTRALIAN AVE</b><br><b>RIVIERA BEACH FL</b>         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>DT</b><br><b>REMES, SUSAN</b><br><b>208 N. U.S. HIGHWAY ONE- UNIT # 3</b><br><b>TEQUESTA, FL</b>         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> 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: Austin W. Verity Date 3-24-2001 Daytime Phone # 561-244-9679

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)