

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S21700

1. Entity Name

AMPHIBIANS, INC.

FILED

Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90089 006 ***150.00

Principal Place of Business

Mailing Address

15195 NE 21ST AVENUE
NORTH MIAMI BEACH FL 33162
US

15195 NE 21ST AVENUE
NORTH MIAMI BEACH FL 33162-6001
US

2. Principal Place of Business

7530 MIAMI VIEW DR
Suite, Apt. #, etc.

3. Mailing Address

7530 MIAMI VIEW DR.
Suite, Apt. #, etc.

00000130



DO NOT WRITE IN THIS SPACE

City & State

N. BAY VILLAGE
33141 USA

City & State

N. BAY VILLAGE
33141 USA

4. FEI Number

65-0284684

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FRANKLIN, JEANNE
15195 NE 21ST AVENUE
NORTH MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name

JEANNE FRANKLIN

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

7530 MIAMI VIEW DR

City

N. BAY VILLAGE

FL

33141

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

Jeanne Franklin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/31/00

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

TITLE VP ☐ Delete
NAME FRANKLIN, DEAN H.
STREET ADDRESS 15195 NE 21ST AVENUE
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162

TITLE PD ☐ Delete
NAME FRANKLIN, JEANNE
STREET ADDRESS 15195 NE 21ST AVENUE
CITY-ST-ZIP NORTH MIAMI BEACH FL 33162

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP ☒ Change ☐ Addition
NAME FRANKLIN, DEAN H.
STREET ADDRESS 7530 MIAMI VIEW DR
CITY-ST-ZIP N. BAY VILLAGE FL 33141

TITLE PD ☒ Change ☐ Addition
NAME FRANKLIN, JEANNE
STREET ADDRESS 7530 MIAMI VIEW DR.
CITY-ST-ZIP N. BAY VILLAGE, FL 33141

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

TITLE ☐ Change ☐ Addition
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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:

Jeanne Franklin Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/00 (305) 759-1456
Date Daytime Phone #

CR2E034 (9/99)