

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S37251

1. Entity Name

MUNA, INC.

Principal Place of Business

PO BOX 970045
COCONUT CREEK FL 33097
US

Mailing Address

PO BOX 970045
COCONUT CREEK FL 33097-0045
US

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

59-3062391

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

GOSSER, LEO A.
5893 NW 63RD WAY
PARKLAND FL 33067

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)

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10. Election Campaign Financing
Trust Fund Contribution

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\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PR
GOSSER, MARIE M
5893 NW 63RD WAY
PARKLAND FL 33067

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
GOSSER, LEO A
5893 NW 63RD WAY
PARKLAND FL 33067

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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

LEO A. GOSSER

5/30/00

754-344-147

RESENT

Leo A. GOSSE

5/30/00

754-344-147