

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S59563

1. Entity Name

MIDNIGHT BANDIT CORPORATION, INC.

**FILED**  
**May 18, 2000 8:00 am**  
**Secretary of State**

05-18-2000 90331 022 \*\*\*158.75

Principal Place of Business

Mailing Address

465 PINELLAS BAYWAY #210  
TIERRA VERDE FL 33715  
US

465 PINELLAS BAYWAY #210  
TIERRA VERDE FL 33946-0083  
US

2. Principal Place of Business

925 Birdie Way

Suite, Apt. #, etc.

3. Mailing Address

925 Birdie Way

Suite, Apt. #, etc.

City & State

Apollo Beach FL

City & State

Apollo Beach FL

4. FEI Number

59-3069990

Applied For

Not Applicable

Zip

33572

Country

Hillsborough

Zip

33572

Country

Hillsborough

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

RICE, CONSTANCE

465 PINELLAS BAYWAY #210  
TIERRA VERDE FL 33715

Constance Rice  
925 Birdie Way  
Apollo Beach FL  
33572

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)

☒

**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 D  
STREET ADDRESS RICE, CONSTANCE  
CITY-ST-ZIP 465 PINELLAS BAYWAY #210  
TIERRA VERDE FL 33715

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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS RICE, CONSTANCE  
CITY-ST-ZIP 1110 3RD STREET S  
ST PETERSBURG FL

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  
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STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
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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: Constance Rice  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00 (813) 649-9838  
Date Daytime Phone #

CR2E034 (9/99)