

2000 UNIFORM BUSINESS REPORT (UBR)

10f2

DOCUMENT # S77952

1. Entity Name

REMINISCENCE, INC.

FILED

00 JUL 24 AM 8:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

321 MIRACLE MILE
CORAL GABLES FL 33134
US

Mailing Address

321 MIRACLE MILE
CORAL GABLES FL 33134
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0285686

Applied For

Not Applicable

Zip

Country

Zip

Country

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

LAZAN, DAVID M.
1090 KANE CONCOURSE
SUITE 202
BAY HARBOR ISLAND FL 33154

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRANT, DIANE
3904 DURANGO ST.
CORAL GABLES FL 33134 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400003351544-2
-08/09/00--01092--022
****150.00 ****150.00 ☐ Change ☐ Addition

TITLE
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TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

David M. Lazan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-2000 305-444-8665

Date

Daytime Phone #

CP2E034 (5/00)

KE

20f2

REMINISCENCE

321 Miracle Mile

Coral Gables, Florida 33134

305.441.8665 telephone 305.443.7699 facsimile

July 11th, 2000

State of Florida
Department of Corporations
Tallahassee, Florida

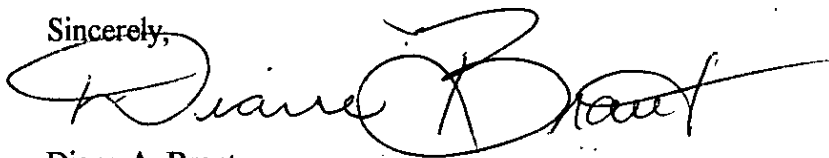
Dear Department Representative:

Recently we received notification that you had not received our Corporation renewal. Upon telephoning our bank, we also discovered that the check we had mailed to you around April 15, 2000 also did not clear.

Per our conversation with your office, we are resubmitting the appropriate paperwork and a check in the amount of one hundred fifty dollars to replaced the uncanceled check. We are not stopping payment on the first check as it was made out to the State of Florida; however, if the original check does appear in your office please reutrn it to us.

If you have any further questions please contact either the undersigned or Barbara Spencer at 305.441.8665. We thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Diane Brant". The signature is fluid and cursive, with a large loop at the end.

Diane A. Brant