

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90093 005 ***150.00

DOCUMENT # S78718

1. Entity Name

GENCO PRESS, INC.

Principal Place of Business

Mailing Address

23123 ST RD 7
 105
 BOCA RATON FL 33428
 US

23123 ST RD 7
 105
 BOCA RATON FL 33428-5407
 US

2. Principal Place of Business

3. Mailing Address

11387-B W. PALMETTO PARK RD. SUITE, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

BOCA RATON, FL.

BOCA RATON, FL.

Zip

Country

Zip

Country

33428

PALM BEACH

33428

PALM BEACH

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MESSINA, JOHN
22314 BUSHING ST
BOCA RATON FL 33428

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P
MESSINA, DOROTHY
23123 STATE RD 7 S105
BOCA RATON FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VP
MESSINA, JOHN
23123 STATE RD 7 S105
BOCA RATON FL

☐ Delete

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 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:

Dorothy Messina **Dorothy MESSINA** **3-14-00** **(561) 487-2484**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)