

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V09768

1. Entity Name

SUNQUEST TREES INC.

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90007 016 ***150.00

Principal Place of Business

Mailing Address

8892 156 COURT SO.
DELRAY BEACH, FL 33446

8892 156 COURT SO.
DELRAY BEACH, FL 33446 33446-9730

2. Principal Place of Business

8180 96th Ct. South

3. Mailing Address

P.O. BOX 740466

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOYNTON BEACH, FL

City & State

BOYNTON BEACH, FL

4. FEI Number

65-0305053

Applied For

Not Applicable

Zip

33437

Country

Zip

33474-0466

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

THORNSBURY, KEN
8892 156 COURT SO.
DELRAY BEACH FL 33446

7. Name and Address of New Registered Agent

Name

EFREN CASTRO

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

8180 96th CT. South

City

BOYNTON BEACH

FL

Zip Code
33437

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

TITLE ☐ Delete
NAME ST
STREET ADDRESS EFREN, CASTRO
CITY-ST-ZIP 82-291 AVENUE 61
THERMAL CA 92274

TITLE ☒ Delete
NAME V
STREET ADDRESS JACOB, GREG
CITY-ST-ZIP 8892 156TH CT S
DELRAY BEACH FL

TITLE ☒ Delete
NAME P
STREET ADDRESS KENNETH,
CITY-ST-ZIP 2000 SHARON ST.
BOCA RATON FL 33436

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 ☒ Change ☐ Addition
NAME ST/P
STREET ADDRESS CASTRO, EFREN
CITY-ST-ZIP 8180 96th CT. South
BOYNTON BEACH FL 33437

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS CASTRO, LISA
CITY-ST-ZIP 82-291 AVENUE 61
THERMAL, CA 92274

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

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

TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EFREN CASTRO

Date

Daytime Phone #

CR2E034 (9/99)