

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V10289

1. Entity Name

I.F.R., INC.

FILED
Mar 23, 2000 8:00 am
Secretary of State

03-23-2000 90040 013 ***150.00

Principal Place of Business

Mailing Address

~~4861 NORTH DIXIE HWY.~~
~~SUITE 201~~
~~FT LAUDERDALE FL 33334~~
~~US~~

1711 Bayview Dr
FT LAUDERDALE
FL 33305

~~4861 NORTH DIXIE HWY.~~
~~STE 201~~
~~FT LAUDERDALE FL 33334-3953~~
~~US~~

2. Principal Place of Business

3. Mailing Address

1711 Bayview Dr
Suite, Apt. #, etc.
FT LAUDERDALE FL
City & State

1711 Bayview Dr
Suite, Apt. #, etc.
FT LAUDERDALE FL
City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0310982

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

Zip 33305

Country USA

Zip 33305

Country USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LONG, DALE M
~~4861 N DIXIE HWY.~~
~~STE 201~~
FT LAUDERDALE FL 33334

1711 BAYVIEW DR
FT LAUDERDALE FL
33305

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

Dale M Long

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2-28-2000

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 LONG, DALE M 1711 BAYVIEW DRIVE FT LAUDERDALE FL 33305 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LONG, CHERYL L 1711 BAYVIEW DRIVE FT LAUDERDALE FL 33305 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Dale M Long DALE M. LONG - PRES 3-20-2000-1-954-6303191