2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT# V16465 Jul 05, 2000 8:00 am Secretary of State DEMOAR INVESTMENT CORD 06-08-2000 90445 032 \*\*\*150.00 Principal Place of Business Mailing Address 501 W. ZION CHURCH RC 1428 BRICKELL ave SHELBY, NC 28150 MURMI, FL 33131 2. Principal Place of Business 3. Mailing Address 305 PRINCETON asibnocy Blva DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State BARRING TON Not Applicable \$8.75 Additional -5. Certificate of Status Desired (POOP) Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **いたくのがた** KOBERT GEIGER submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named ar SIGNATURE FILE NOW!! FEE 19:\$150.00 9. This corporation is elig sly its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 // Make Check Payable to Department of State Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) DOITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. (66/6)☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS ೦೨೦೦೦ CITY-ST-ZIP--CITYEST-ZIP= ☐ Change ☐ Addition ☐ Delete TITLE TITLE GERY NO. NAME STREET ADDRESS STREET ADDRESS ගලනො CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ Delete TITLE 3776 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 🗀 Сћапде Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i) Flörida 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 SIGNATURE: