

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 11, 2000 8:00 am**  
**Secretary of State**

04-11-2000 90003 020 \*\*\*158.75

**DOCUMENT # V30896**

1. Entity Name  
**DEN AIRE INC.**

Principal Place of Business      Mailing Address  
**3225 SW 124TH CT**      **3225 SW 124TH CT**  
**MIAMI FL 33175**      **MIAMI FL 33175-2638**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**13300 SW 108 CT**      **13300 SW 108 CT**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State  
**MIAMI, FL**      **MIAMI FL**

Zip      Country      Zip      Country  
**33176**           **33176**           **33176**           **33176**

4. FEI Number      Applied For  
**65-0334429**       Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**BRODBECK, BRUCE D**  
**3225 SW 124TH CT )**  
**MIAMI FL 33175 )** *New Address →*

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
**13300 SW 108 CT**  
 City      State      Zip Code  
**MIAMI**      **FL**      **33176**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	PD <b>BRODBECK, BRUCE D</b> <b>3225 SW 124TH CT</b> <b>MIAMI FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD <b>BRODBECK, JOYCE E</b> <b>3225 SW 124TH CT</b> <b>MIAMI FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>New Address</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>13300 SW 108 CT</b> <b>MIAMI, FL 33176</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>New Address</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>13300 SW 108 CT</b> <b>MIAMI, FL 33176</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Joyce E. Brodbeck*      **Joyce E. Brodbeck**      4/4/00      (986)242-8260  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)