

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90054 010 ***150.00

0002680

DOCUMENT # V32081

1. Entity Name
SGD ENTERPRISES, INC.

Principal Place of Business
**302 SOLANA RD.
 PONTE VEDRA BCH. FL 32072**

Mailing Address
**302 SOLANA RD.
 PONTE VEDRA BCH. FL 32072**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3138266**

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE


6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PAYEZ, GEORGE
 167 SOLANO CAY CIR
 PONTE VEDRA BEACH FL 32082**

Name **Payez George**
 Street Address (P.O. Box Number is Not Acceptable)
465 S. Roscoe Blvd Apt.
 City **Ponte Vedra Beach** **FL** Zip Code **32082**

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  **George Payez** **1/5/00**
 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, 2001 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 **P** ☐ Delete
 NAME **PAYEZ, GEORGE**
 STREET ADDRESS **167 SOLANO CAY CIRCLE**
 CITY-ST-ZIP **PONTE VEDRA BCH. FL 32082**

TITLE ☐ Change ☐ Addition
 NAME **465 S. Roscoe Blvd. Apt**
 STREET ADDRESS **Ponte Vedra FL 32082**
 CITY-ST-ZIP

TITLE **ST** ☐ Delete
 NAME **LESTER, SUSAN**
 STREET ADDRESS **611 PONTE VEDRA LAKES BLVD., #3307**
 CITY-ST-ZIP **PONTE VEDRA BCH: FL 32082**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:  **1/5/00** **904-286-7474**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)