

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V35804

1. Entity Name

IDEAL OPPORTUNITIES, INC.

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90331 025 ***150.00

Principal Place of Business

316 N JOHN YOUNG
SUITE 14
KISSIMMEE FL 34741
US

Mailing Address

~~200 E ROBINSON ST~~
~~SUITE 500~~
ORLANDO FL 32801

2. Principal Place of Business

3. Mailing Address

P O Box 430401

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Kissimmee FL

4. FEI Number 59-3125206

Applied For

Not Applicable

Zip

Country

Zip

Country

34743 USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLORIDA CORPORATE SUPPORT INC.
200 E ROBINSON STREET
SUITE 500
ORLANDO FL 32801

Name Peter J Groenendijk

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

316 N John Young Pky

Suite 14

City

Kissimmee

FL

Zip Code

34741

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 of registered agent or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

P J Groenendijk President

3/2/01

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 PSD
NAME GROENENDIJK, PETER J.
STREET ADDRESS 316 N JOHN YOUNG PKWY, SUITE 14
CITY-ST-ZIP KISSIMMEE FL 34741 ☐ Delete

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

TITLE VD
NAME GROENENDIJK, ANNELESE
STREET ADDRESS 316 N. JOHN YOUNG PKWY, SUITE 14
CITY-ST-ZIP KISSIMMEE FL 34741 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VD
NAME Bebe N Majeed
STREET ADDRESS 3608 Darenting Court
CITY-ST-ZIP Orlando FL 32817 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P J Groenendijk Pres.

3/2/01

Date

407 944 9575

Daytime Phone #

CR2E034 (10/00)