

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2001 8:00 am**  
**Secretary of State**  
 04-16-2001 90004 025 \*\*\*150.00

0286327

**DOCUMENT # V39654**

1. Entity Name  
**ZYDECO INVESTMENTS, INC.**

Principal Place of Business  
**1220 US HWY 1**  
**STE B**  
**NORTH PALM BCH FL 33408**  
**US**

Mailing Address  
**1220 US HWY 1**  
**STE B**  
**NORTH PALM BCH FL 33408**  
**US**

2. Principal Place of Business

**12575 US Hwy 1**  
 Suite, Apt. #, etc.  
**201**

3. Mailing Address

**12575 US Hwy 1**  
 Suite, Apt. #, etc.  
**201**



DO NOT WRITE IN THIS SPACE

City & State  
**JUNO BEACH FL**

City & State  
**JUNO BEACH FL**

4. FEI Number **65-0336868**

Applied For  
 Not Applicable

Zip  
**33408**

Country  
**USA**

Zip  
**33408**

Country  
**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ATKINS, MARTIN**  
**1220 US HWY 1**  
**STE B**  
**NPB FL 33408**

7. Name and Address of New Registered Agent

Name **12575 US Hwy 1 #201**  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **JUNO BEACH FL** Zip Code **33408**

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 *Martin Atkins* DATE 4/10/01  
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, 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

TITLE **DP** ☐ Delete  
 NAME **ATKINS, MARTIN**  
 STREET ADDRESS **1220 US HWY STE B**  
 CITY-ST-ZIP **NPB FL 33408**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Same** ☒ Change ☐ Addition  
 NAME **12575 US HIGHWAY 1 Ste 201**  
 STREET ADDRESS **JUNO BEACH, FL 33408**  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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: *Martin Atkins*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01  
Date

Daytime Phone #

CR2E034 (10/00)