

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90066 029 ***150.00

00101343

DO NOT WRITE IN THIS SPACE

DOCUMENT # U43119

1. Entity Name
Dani Group, Inc.

Principal Place of Business _____ **Mailing Address** _____

2. Principal Place of Business
2521 45th Court West
 Suite, Apt. #, etc.

3. Mailing Address
2521 45th Court West
 Suite, Apt. #, etc.

City & State
Bradenton FL
Zip 34209 **Country** US

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Bradenton FL
Zip 34209 **Country** US

4. FEI Number 65-0337457 **Applied For**
☐ **Not Applicable**

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

6. Name and Address of Current Registered Agent
Richtscheidt, John P.
2521 45th Court West
Bradenton, FL 34209

7. Name and Address of New Registered Agent
Name _____
Street Address (P.O. Box Number is Not Acceptable) _____
City FL **Zip Code** _____

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 <u>D</u>	NAME <u>Richtscheidt, John P.</u>	<input type="checkbox"/> Delete
STREET ADDRESS <u>2521 45th Court West</u>	CITY-ST-ZIP <u>Bradenton, FL 34209</u>	
TITLE <u>VP</u>	NAME <u>Richtscheidt, Carol A.</u>	<input type="checkbox"/> Delete
STREET ADDRESS <u>2521 45th Court West</u>	CITY-ST-ZIP <u>Bradenton, FL 34209</u>	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: John P. Richtscheidt, President **Date** (941) 795-7202 **Daytime Phone #**

CR2E034 (9/99)