

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V66869

1. Entity Name

DISCOUNT AIR, INC.

R

**FILED**  
**Jul 31, 2000 8:00 am**  
**Secretary of State**

07-31-2000 90007 048 \*\*\*150.00

Principal Place of Business

1406 N. ARMENIA AVE  
TAMPA FL 33607  
US

Mailing Address

1406 N. ARMENIA AVE  
TAMPA FL 33607  
US

2. Principal Place of Business

6394 - 15<sup>th</sup> St. E.

Suite, Apt. #, etc.

3. Mailing Address

6394 - 15<sup>th</sup> St. E.

Suite, Apt. #, etc.

City & State

SARASOTA, FL

City & State

SARASOTA

4. FEI Number

59-2745926

Applied For

Not Applicable

Zip

34243

Country

MANATEE

Zip

34243

Country

MANATEE

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

TAUCHER, STEVEN E  
1406 N. ARMENIA AVE.  
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name

MICHAEL D. KOPEL

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

6394 - 15<sup>th</sup> St. E.

City

SARASOTA

FL

Zip Code

34243

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

MICHAEL D. KOPEL

7/25/00

(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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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	D	<input checked="" type="checkbox"/> Delete
NAME	TAUCHER, RODNEY K.	
STREET ADDRESS	3114 SAMARA DRIVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	TAUCHER, STEVEN E.	
STREET ADDRESS	1406 N. ARMENIA AVE	
CITY-ST-ZIP	TAMPA FL 33607	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MICHAEL D. KOPEL	
STREET ADDRESS	6394 - 15 <sup>th</sup> St. E.	
CITY-ST-ZIP	SARASOTA, FL 34243	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL D. KOPEL 7/25/00

Date

(941) 751-2665

Daytime Phone #

Attachment  
V66869  
A0570253

Discount Air, Inc.  
6394 - 15<sup>th</sup> St. East  
Sarasota, FL 34243  
(941) 751-2665

July 25, 2000

Florida Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314

Subject: Profit Corporation - Annual Filing  
Document # V66869


To Whom It May Concern:

We would appreciate your consideration in waiving the late filing fee for subject corporation. We did not receive the original filing form.

The principal place of business was being changed and the original report was not forwarded timely.

Our check in the amount of \$150.00 is enclosed, along with our report for 2000.

Kindly, approve our request and proceed to process our report. Feel free to contact us regarding any questions.

Many Thanks,  
  
M. D. Kopel  
Director