

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State

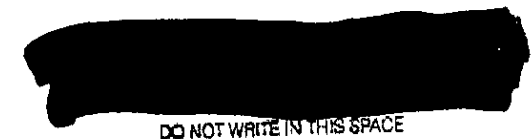
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DOCUMENT # **P94000063883**

1. Entity Name
A.C.C.S. ENTERPRISES, INC.

Principal Place of Business Mailing Address
1009 NW 132 Ave 1017 NW 132 Ave
Sunrise, FL 33323 Sunrise, FL 33323

2. Principal Place of Business 3. Mailing Address
1009 NW 132nd Ave
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State **Sunrise FL** City & State
 Zip **33323** Country Zip Country



4. FEI Number **65-0530069** Apply For NOT APPLICABLE
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
Draizin, Scott D.
1009 NW 132 Ave
Sunrise, FL 33323

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

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 date if applicable. (NOTE: Registered Agent's signature required when renewing.)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$850.00
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	
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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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **TODD E. DRAIZIN** **President** **4/28/00** **954-472-3300**
Signature and typed or printed name of signing officer or director Date