

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000005294

1. Entity Name

R2 INNOVATIVE TECHNOLOGIES, INC.

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90069 042 ***150.00

Principal Place of Business

160 SW 12 AVENUE #101B
DEERFIELD BEACH FL 33442

Mailing Address

160 SW 12 AVENUE #101B
DEERFIELD BEACH FL 33442-3114

2. Principal Place of Business

c/o Alan J. Werksman, Esq.

3. Mailing Address

c/o Alan J. Werksman, Esq.

Suite, Apt. #, etc.

160 SW 12 AVENUE #101B

Suite, Apt. #, etc.

160 SW 12 AVENUE #101B

City & State

Deerfield Beach, FL 33442

City & State

Deerfield Beach, FL 33442,

Zip

Country

Zip

Country

4. FEI Number

65-0888120

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WERKSMAN, ALAN J
160 SW 12 AVENUE #101B
DEERFIELD BEACH FL 33442

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

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

(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 \$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 **D** ☐ Delete
NAME **SCHOENFELD, RICH**
STREET ADDRESS **1111 NORTHUMBERLAND COURT**
CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Change ☒ Addition
NAME **D/P**
STREET ADDRESS **ROBERT RODGERS**
CITY-ST-ZIP **2630 Bedford Mews Drive**
Wellington, FL 33414

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

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

TITLE ☐ Change ☐ Addition
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:

Robert Rodgers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-00

Date

561-333-6450

Daytime Phone #

CR2E034 (9/99)