

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 663159

1. Entity Name

WAREHOUSES MANAGEMENT SERVICES, INC.

FILED

Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90020 045 ***150.00

Principal Place of Business

4180 NW 132ND STREET
MIAMI FL 33054

Mailing Address

4180 NW 132ND STREET
MIAMI FL 33054

948906



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2850 C STIRLING ROAD

3. Mailing Address

2850 C STIRLING ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

4. FEI Number

59-1965196

Applied For

Not Applicable

Zip

33020

Country

BROWARD

Zip

33020

Country

BROWARD

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZOROVICH, FRED A
4180 NW 132ND ST.
MIAMI FL 33054

Name

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

2850 C STIRLING ROAD

City

HOLLYWOOD

FL

Zip Code

33020

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

4-13-2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME ZOROVICH, FRED
STREET ADDRESS 4180 NW 132ND ST.
CITY-ST-ZIP MIAMI FL 33054 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2850 C STIRLING ROAD
CITY-ST-ZIP HOLLYWOOD, FL 33020

TITLE STD
NAME GILLAM, CAROLYN
STREET ADDRESS 4180 NW 132ND ST.
CITY-ST-ZIP MIAMI FL 33054 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS SAME AS ABOVE
CITY-ST-ZIP

TITLE VPD
NAME AVSHALOM, JOY
STREET ADDRESS 4180 NW 132ND ST.
CITY-ST-ZIP MIAMI FL 33054 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS SAME AS ABOVE
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-13-2001 954-923-1425

CR2E034 (10/00)