

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90782 014 ****70.00

DOCUMENT # 716257

1. Entity Name

**1969 LA SOCIETE DES QUARANTE HOMMES ET HUIT CHEV
AUX, GRANDE VOITURE OF FLORIDA**



Principal Place of Business

**HUIT CHEVAUX GRAND VOITURE OF FLORIDA
316 S W 25TH STREET
FORT LAUDERDALE FL 33315**

Mailing Address

**1540 H 71 AVE
HOLLYWOOD FL 33024
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-6151483**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ARCHER, SAM
1540 N 71 AVE
HOLLYWOOD FL 33024**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **SAMUELE ARCHER Samuel E Archer**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-10-2003

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
NAME **ADAMS, JIM**
STREET ADDRESS **751 CYPRESS LN APT B**
CITY-ST-ZIP **POMPAÑO BEACH FL 33064-5073**

TITLE **PD** ☒ Change ☐ Addition
NAME **ROBERT ESTNER**
STREET ADDRESS **253 FARNHAM BLDG**
CITY-ST-ZIP **DEERFIELD BCH FL 33442**

TITLE **D** ☐ Delete
NAME **SCHIGHTL, HERBERT A**
STREET ADDRESS **1600 N 71 AVE**
CITY-ST-ZIP **HOLLYWOOD FL 33024**

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

TITLE **SD** ☐ Delete
NAME **ARCHER, SAM**
STREET ADDRESS **1540 N. 71ST AVE**
CITY-ST-ZIP **HOLLYWOOD FL 33024**

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

TITLE **TD** ☐ Delete
NAME **DOCYK, EDWARD**
STREET ADDRESS **2134 NOVA VILLAGE DR**
CITY-ST-ZIP **DAVIE FL 33317**

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

TITLE **D** ☒ Delete
NAME **ESTNER, ROBERT**
STREET ADDRESS **198 FARNHAM 1**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **D** ☒ Change ☐ Addition
NAME **SHAW, Richard**
STREET ADDRESS **1380 NW 43 Terr. A-301**
CITY-ST-ZIP **LAUDERHILL FL 33313**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SAMUELE ARCHER** **Samuel E Archer**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-2003
Date Daytime Phone #

954-989-7154

CR2E037 (10/02)