2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State
05-01-2002 91492 016 ***150.00

DOCUMENT # P01000109574

1. Entity Name
PROGRESSIVE COMMUNICATIONS MANAGEMENT, INC.

Principal Place of Business	Mailing Address
11650 S.W. 22 COURT DAVIE FL 33325	11650 S.W. 22 COURT DAVIE FL 33325

949835

2. Principal Place of Business	3. Mailing Address
950 South Pine Island Road	950 South Pine Island Road
Suite, Apt. #, etc.: Suite 1062	Suite, Apt. #, etc.: Suite 1062
City & State: Plantation, Florida	City & State: Plantation, Florida
Zip: 33325 Country: USA	Zip: 33325 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1155642 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WEISENBERG, DAVID
11650 S.W. 22 COURT
DAVIE FL 33325

7. Name and Address of New Registered Agent

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	P WEISENBERG, DAVID 11650 SW 22 COURT DAVIE FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MATTHEWS, ROBERT H 11980 PICCADILLY PLACE DAVIE FL 33325 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition 1937 Timberline Road Weston, Florida 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

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: ____________________ 4/22/02 9547278181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #