163 P03 OCT 02 '00 08:57

8/31/00-90002-031-$550.00-$550.00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000018454

1. Entity Name

800 ANDREWS AVENUE CORPORATION

FILED

00 OCT -3 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
450 E LAS OLAS BLVD STE 950 FT LAUDERDALE FL 33301	450 E LAS OLAS BLVD STE 950 FT LAUDERDALE FL 33301-4200

2. Principal Place of Business		3. Mailing Address	
Bryan W. Berry		Bryan W. Berry	
Suite, Apt. #, etc. 2505 NE 7th Place		Suite, Apt. #, etc. 2505 NE 7th Place	
City & State: Fort Lauderdale, FL		City & State: Fort Lauderdale, FL	
Zip: 33304	Country:	Zip: 33304	Country:

4. FEI Number ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RICHARDSON, GEX
450 E LAS OLAS BLVD STE 950
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name: Rodriguez & Angelo, P.A.
Street Address (P.O. Box Number is Not Acceptable): 333 North New River Drive East
Suite 4000
City: Fort Lauderdale FL Zip Code: 33301

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] 10/2/00
(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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Bryan, W. Berry 2505 NE 7th Place Fort Lauderdale, FL 33304	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Vernon Pierce 300 NE Third Avenue, Ste. 300 Fort Lauderdale, FL 33301	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LS ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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] BRYAN W. BERRY 8/27/00 (954)-463-4794
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #