

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 498281

1. Entity Name

THE FLORIDA AD COMPANY

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90093 023 ***150.00

Principal Place of Business

Mailing Address:

2151 W HILLSBOROUGH BLVD.
STE 400
DEERFIELD BCH FL 33442
US

2151 W. HILLSBOROUGH BLVD.
SUITE 400
DEERFIELD BCH FL 33442-1297
US

2. Principal Place of Business

2151 W. Hillsboro Blvd.

3. Mailing Address

2151 W. Hillsboro Blvd.

Suite, Apt. #, etc.

Suite 400

Suite, Apt. #, etc.

Suite 400

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

Zip

33442

Country

USA

Zip

33442

Country

USA

4. FEI Number

59-2005843

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERKINS, KENNETH A.
% GEMAIRE DISTRIBUTORS INC
2151 W HILLSBORO BLVD #400
DEERFIELD BEACH FL 33442

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, 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 **SDV** ☐ Delete
NAME **LOGAN, BARRY S.**
STREET ADDRESS **2665 S. BAYSHORE DRIVE, #901**
CITY-ST-ZIP **COCONUT GROVE FL 33133**

TITLE **DP** ☐ Delete
NAME **PERKINS, KENNETH A.**
STREET ADDRESS **251 W HILLSBORO BLVD #400**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **VOT** ☐ Delete
NAME **FUMAGALI, OSCAR T**
STREET ADDRESS **2151 W HILLSBORO BLVD #400**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

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 **DV Asst. Sec.** ☐ Change ☒ Addition
NAME **Menendez, Ana M.**
STREET ADDRESS **2665 S. Bayshore Drive, Suite 901**
CITY-ST-ZIP **Coconut Grove, FL 33133**

TITLE **Asst. Treas.** ☐ Change ☒ Addition
NAME **Palmese, Daniel**
STREET ADDRESS **2665 S. Bayshore Drive, Suite 901**
CITY-ST-ZIP **Coconut Grove, FL 33133**

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

TITLE ☐ Change ☐ Addition
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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 another like empowered.

SIGNATURE:

Daniel Palmese
Ass't. Treasurer

03/22/00 (305) 714-4119

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)