

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90192 043 ***150.00

DOCUMENT # 505224

1. Entity Name

WORLD DANCE STUDIOS, INC.

Principal Place of Business

15410 SW 77TH AVENUE
MIAMI FL 33157

Mailing Address

% HMPD
16100 NE 16 AVE
NO MIAMI BCH FL 33162
US

2. Principal Place of Business

600 BILTMORE WAY

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

PH 110

City & State

CORAL GABLES, FL

Zip

33134

Country

MIAMI-DADE

Zip

Country

4. FEI Number 59-1676853

Applied For

Not Applicable

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

THEISS, GEORGE B.

15410 SW 77TH AVE.
MIAMI FL 33157

Name

GEORGE B. THEISS

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

600 BILTMORE WAY

Suite

PH 110

City

CORAL GABLES

FL

Zip Code
33134

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, 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 PSD ☐ Delete

NAME THEISS, GEORGE B.
STREET ADDRESS 15410 S.W. 77TH AVE.
CITY-ST-ZIP MIAMI FL

TITLE PSD ☒ Change ☐ Addition

NAME THEISS, GEORGE B.
STREET ADDRESS 600 BILTMORE WAY, Suite
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE V ☐ Delete

NAME THEISS, LEONARD J.
STREET ADDRESS 118 ANCHORAGE DR.
CITY-ST-ZIP NORTH PALM BCH FL

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete

NAME THEISS, ALICE W.
STREET ADDRESS 118 ANCHORAGE DR.
CITY-ST-ZIP NORTH PALM BCH FL

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete

NAME THEISS, GEORGIA H.
STREET ADDRESS 15410 SW 77 AVENUE
CITY-ST-ZIP MIAMI FL

TITLE S ☒ Change ☐ Addition

NAME THEISS, GEORGIA H.
STREET ADDRESS 600 BILTMORE WAY, Suite
CITY-ST-ZIP CORAL GABLES, FL 33134

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

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 #

CR2E034 (10/00)