

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 514314

1. Entity Name

THE FLYER PUBLISHING CORPORATION

FILED  
Apr 10, 2001 8:00 am  
Secretary of State

04-10-2001 90097 029 \*\*\*150.00

Principal Place of Business

11900 SW 128TH ST  
MIAMI FL 33186  
US

Mailing Address

200 CONCORD PLAZA DRIVE, SUITE 800  
SAN ANTONIO TX 78216

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1702144

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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, 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	P	<input type="checkbox"/> Delete
NAME	GUZMAN, CARLOS	
STREET ADDRESS	11900 SW 128	
CITY-ST-ZIP	MIAMI FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HARTE, HOUSTON H.	
STREET ADDRESS	200 CONCORD PLAZA #800	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FRANKLIN, LARRY D.	
STREET ADDRESS	200 CONCORD PLAZA #800	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	VS	<input type="checkbox"/> Delete
NAME	CREWS, DONALD R.	
STREET ADDRESS	200 CONCORD PLAZA #800	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE	TAS	<input type="checkbox"/> Delete
NAME	ORTIZ, FEDERICO	
STREET ADDRESS	200 CONCORD PLAZA #800	
CITY-ST-ZIP	SAN ANTONIO TX	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

3/27/01

Date

210-829-9358

Daytime Phone #

CR2E034 (10/00)