

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 740208

1. Entity Name

SIG-AL, INC.

FILED
Aug 08, 2001 8:00 am
Secretary of State

08-08-2001 90011 023 ****75.00

Principal Place of Business Mailing Address
 15800 N.W. 42ND AVENUE 15800 N.W. 42ND AVENUE
 MIAMI FL 33054 MIAMI FL 33054



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-2614284		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MACK, ASTRID 5020 N.W. FIRST AVENUE MIAMI FL 33127		Name: STANLEY ALLEN Street Address (P.O. Box Number is Not Acceptable): 1420 SW 104 AVE City: PEMBROKE PINES FL Zip Code: 33025	

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: STANLEY A. ALLEN Stanley Allen CHIEF FINANCIAL OFFICER 8/8/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution. ☒ **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FISHER, RICHARD 1550 NW 143 ST MIAMI FL 33167 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FO ALLEN, STANLEY 1420 SW 104 AVE PEMBROKE PINES FL 33025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EARL, DANIELS 3250 FROW AVE MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD COAKLEY, AUDLEY 6930 NW 186 ST MIAMI FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRINSON, WILLIE 1421 NW 137 AV. MIAMI FL 33167 ☐ 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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stanley Allen Stanley Allen 8/8/01 954-205-7783

CR2037 (5/01)