

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90265 040 ***150.00

0007335 AV

DOCUMENT # F01000003242

1. Entity Name
G-IV ENTERPRISES OF SOUTH CAROLINA, INC.

Principal Place of Business
**118 CRAIGO RD.
 FOUNTAIN INN SC 29644**

Mailing Address
**13504 SW 108 ST. CIRCLE NORTH
 MIAMI FL 33186**

2. Principal Place of Business
15321 South Dixie Hwy.

3. Mailing Address
15321 South Dixie Hwy.

Suite, Apt. #, etc.
Ste. 306

Suite, Apt. #, etc.
Ste. 306

City & State
Miami, FL

City & State
Miami, FL

Zip .. Country
33157 USA

Zip Country
33157 USA

4. FEI Number **65-0905311**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**CARY WAYNE CLARK
 13504 SW 108 ST. CIRCLE NORTH
 MIAMI FL 33186**

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 **Cary Wayne Clark**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

March 13, 2002

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, 2002 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 **CP** ☐ Delete
 NAME **CARY WAYNE CLARK**
 STREET ADDRESS **13504 SW 108 ST. CIRCLE NORTH**
 CITY-ST-ZIP **MIAMI FL 33186**

TITLE **S** ☐ Delete
 NAME **YOUNG, JEANNE**
 STREET ADDRESS **118 CRAIGO RD.**
 CITY-ST-ZIP **FOUNTAIN INN SC 29644**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 all other like empowered.

SIGNATURE:

Cary Wayne Clark

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 13, 2002

Date

Daytime Phone #

CR2E034 (9/01)