

APR-29-2002 11:38

WILLIAM MCCUE & CO., CPAS

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91145 038 ***150.00

DOCUMENT # F01000006354

Entity Name

AMERICAN DESIGN OF SOUTH FLORIDA, INC.Principal Place of Business
**2427 DEER CREEK RD
WESTON FL 33327**

Mailing Address

**2427 DEER CREEK RD
WESTON FL 33327**

1. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-2468785

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

Name

Don Britton

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

1000 S. Andrews Ave.

City

Ft. Lauderdale**FL**

Zip Code

33316**BRITTON, DON
2427 DEER CREEK ROAD
WESTON FL 33327**

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, if applicable,

(NOTE: Registered Agent signature required when resigning)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME STREET ADDRESS CITY - ST - ZIP	TITLE	NAME STREET ADDRESS CITY - ST - ZIP
	PS BRITTON, MELANIE R 2427 DEER CREEK RD. WESTON FL		
	VT BRITTON, I. DONALD 2427 DEER CREEK RD. WESTON FL		

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: *Melanie R. Britton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Custom Phone #

✓ 5/29/02 ✓ 954-217-3673

CR20034 (9/01)