

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State
 05-23-2002 90057 025 ***150.00

DOCUMENT # F27877

1. Entity Name
ADVERTISING ENVIRONMENTS, INC.

Principal Place of Business
808 E. LAS OLAS BLVD..STE.101
FT LAUDERDALE FL 33301

Mailing Address
808 E. LAS OLAS BLVD..STE.101
FT LAUDERDALE FL 33301

432376



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#2306
100 S. BIRCH ROAD

100 S. BIRCH ROAD
#2306

City & State

City & State

FL
FORT LAUDERDALE, FL

FL
FORT LAUDERDALE, FL

4. FEI Number

59-2108933

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

GORDON, JEAN MARIE

~~2841 NORTH OCEAN BLVD.~~

~~#1801~~

FORT LAUDERDALE FL 33308

Name

GORDON, JEAN MARIE

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

100 S. BIRCH ROAD

#2306

FORT LAUDERDALE, FL

Zip Code

33316

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, 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

TITLE **PD** ☐ Delete
 NAME **SOERSEN, JEAN**
 STREET ADDRESS **715 CORDOVA RD**
 CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE **PD** ☒ Change ☐ Addition
 NAME **SOERSEN, JEAN**
 STREET ADDRESS **100 S. BIRCH ROAD #2306**
 CITY-ST-ZIP **FORT LAUDERDALE, FL 33316**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 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: **JEAN MARIE GORDON**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-02 **954-763-7900**
 Date Daytime Phone #

CR2E034 (9/01)