

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000004069

1. Entity Name

TV R INC.

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90067 027 ***150.00

Principal Place of Business

Mailing Address

2301 S.E. 17TH STREET CAUSEWAY
FT. LAUDERDALE FL 33316

5725 PARADISE DR
STE 450
CORTE MADERA CA 94925-1247
US

80015074



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-2723310

Applied For

Not Applicable

Zip

Country

Zip

Country

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
1200 SOUTH PINE ISLAND RD
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, 2000 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 C ☒ Delete
NAME FREEMAN, ROBERT A
STREET ADDRESS 5725 PARADISE DRIVE, SUITE 450
CITY-ST-ZIP CORTE MADERA CA 94925

TITLE EXECUTIVE VP + DIRECTOR ☐ Change ☒ Addition
NAME AMINIFARD, MOHSEN
STREET ADDRESS 5725 PARADISE DR, STE 450
CITY-ST-ZIP CORTE MADERA, CA 94925

TITLE PD ☐ Delete
NAME OUF, HAZEM
STREET ADDRESS 5725 PARADISE DRIVE, SUITE 450
CITY-ST-ZIP CORTE MADERA CA 94925

TITLE EXECUTIVE VP + DIRECTOR ☐ Change ☒ Addition
NAME BENSON JAMES H.
STREET ADDRESS 5725 PARADISE DR, STE 450
CITY-ST-ZIP CORTE MADERA, CA 94925

TITLE VTS ☐ Delete
NAME GHUZZI, JOHN G
STREET ADDRESS 5725 PARADISE DRIVE, SUITE 450
CITY-ST-ZIP CORTE MADERA CA 94925

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

TITLE V ☐ Delete
NAME BOHAN, TIMOTHY
STREET ADDRESS 1006 GREEN OAK DR #24
CITY-ST-ZIP NOVATO CA 94947

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

TITLE V ☐ Delete
NAME BURNS, JOHN S
STREET ADDRESS 5725 PARADISE DR SUITE 450
CITY-ST-ZIP CORTE MADERA CA

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

John G. Ghuzzi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/28/00

415-924-6600