

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J05014

1. Entity Name

MOTTERN SOUND AND PROJECTION SERVICE INC.

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90103 029 \*\*\*150.00

Principal Place of Business

Mailing Address

~~% LISA MOTTERN  
3201 NW 4TH TERR. #74  
POMPANO BEACH FL 33064  
US~~

~~% LISA MOTTERN  
3201 NW 4TH TERR. #74  
POMPANO BEACH FL 33064  
US~~

2. Principal Place of Business

3. Mailing Address

**2323 SW 15th St**  
**#45**

**2323 SW 15th St**  
**45**

City & State  
**Deerfield Bch, FL**

City & State  
**Deerfield Bch, FL**

Zip Country  
**33442 USA**

Zip Country  
**33442 USA**

4. FEI Number **59-2643494**

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

~~MOTTERN, LISA  
3201 NW 4 TERRACE, #74  
POMPANO BEACH FL 33064~~

Name

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

**same as above change...**

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

**Lisa M Mottern**

**Lisa M Mottern**

**4/13/01**

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, 2001 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 **MOTTERN, LISA M**  
STREET ADDRESS **3201 NW 4 TERR #74**  
CITY-ST-ZIP **POMPANO BCH FL**

TITLE **2323 SW 15th St #45** ☒ Change ☐ Addition  
NAME **Deerfield Bch, FL 33442**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VPST** ☐ Delete  
NAME **BAGLEY, LARRY**  
STREET ADDRESS **3201 NW 4 TERRACE #74**  
CITY-ST-ZIP **POMPANO BEACH FL 33064**

TITLE **same** ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ 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:

**Lisa M Mottern** **Lisa M Mottern**

**4/13/01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)