

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J67073

1. Entity Name

MAVERICK MANAGEMENT, INC.

Principal Place of Business

10261 W. BROWARD BLVD.  
PLANTATION FL 33324  
US

Mailing Address

10261 W. BROWARD BLVD.  
PLANTATION FL 33324-2114  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

COSTELLO, JAMES J. JR  
10261 W. BROWARD BLVD.  
PLANTATION FL 33324

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

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

TITLE ☐ Delete

NAME PD  
STREET ADDRESS COOK, KEVIN  
CITY-ST-ZIP 13030 NW 5TH ST  
PLANTATION FL

TITLE ☐ Delete

NAME VD  
STREET ADDRESS COSTELLO, JAMES J. JR.  
CITY-ST-ZIP 700 NW 100TH TERRACE  
PLANTATION FL

TITLE ☐ Delete

NAME TD  
STREET ADDRESS MILLER, TEREL M.  
CITY-ST-ZIP 9830 SW 15TH DRIVE  
DAVIE FL

TITLE ☐ Delete

NAME DS  
STREET ADDRESS COSTELLO, JAMES J S  
CITY-ST-ZIP 6801 NW 6TH CT  
PLANTATION FL

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 CEO, D  
STREET ADDRESS COSTELLO, James J. JR.  
CITY-ST-ZIP 700 NW 100 TERRACE  
PLANTATION, FL 33324

TITLE ☒ Change ☐ Addition

NAME T, D  
STREET ADDRESS MILLER, Terel M.  
CITY-ST-ZIP 900 GROVESMERE LOOP  
OCFEE, FL. 34761

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
James J Costello Jr

Date

Daytime Phone #

FILED  
Apr 10, 2000 8:00 am  
Secretary of State

04-10-2000 90137 001 \*\*\*635.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2804490

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional Fee Required**

CR2F034 (9/99)