

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L96632

1. Entity Name

FLIGHT ASSOCIATES, INC.

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90012 021 \*\*\*158.75

Principal Place of Business

Mailing Address

1380 NW 86 WAY  
CORAL SPRINGS FL 33071  
US

1380 NW 86 WAY  
CORAL SPRINGS FL 33071-6772  
US

2. Principal Place of Business

3. Mailing Address

2345 SE 14 Street  
Suite, Apt. #, etc.

2345 SE 14 Street  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL  
Zip 33062 Country USA

City & State

Pompano Beach, FL  
Zip 33062 Country USA

4. FEI Number

65-0216758

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

BOWERS, BRUCE  
1380 NW 86 WAY  
CORAL SPRINGS FL 33071

Name

Steve Wertheimer

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

2345 SE 14 Street

City

Pompano Beach

FL

Zip Code

33062

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]*  
Signature, typed or printed name of registered agent and title if applicable.

SEC/TREAS.

(NOTE: Registered Agent signature required when reinstating)

4/25/00

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 P ☒ Delete  
NAME GOLD, EDWARD  
STREET ADDRESS 20976 CIPRES WAY  
CITY-ST-ZIP BOCA RATON FL

TITLE P ☐ Change ☒ Addition  
NAME Tony Ard  
STREET ADDRESS 240 SE 28 AVE  
CITY-ST-ZIP Pompano Beach, FL 33062

TITLE DT ☒ Delete  
NAME BOWERS, BRUCE  
STREET ADDRESS 1380 NW 86 WAY  
CITY-ST-ZIP CORAL SPGS FL

TITLE ☒ ☐ Change ☒ Addition  
NAME Bruce Bowers  
STREET ADDRESS 1380 NW 86 Way  
CITY-ST-ZIP Coral Springs, FL 33071

TITLE T ☒ Delete  
NAME BOWERS, BRUCE  
STREET ADDRESS 1380 NW 86 WAY  
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE S/T ☐ Change ☒ Addition  
NAME Steve Wertheimer  
STREET ADDRESS 2345 SE 14 Street  
CITY-ST-ZIP Pompano Beach, FL 33062

TITLE D ☒ Delete  
NAME SASMON, DIGBE  
STREET ADDRESS 2920 NW 25 WAY  
CITY-ST-ZIP BOCA RATON FL

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

TITLE D ☒ Delete  
NAME GOLD, EDWARD  
STREET ADDRESS 20976 CIPRES WAY  
CITY-ST-ZIP BOCA RATON FL

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

TITLE D ☒ Delete  
NAME WIRTHEIME, STEVE  
STREET ADDRESS 299 N RIVERSIDE DR., #307  
CITY-ST-ZIP POMPANO BCH FL

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

4/25/00  
Date

954-974-0003  
Daytime Phone #

CR2E034 (9/99)