

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90037 042 ****50.00

DOCUMENT # M00000000433.

1. Entity Name

TEAM ONE EXHIBITOR SERVICES, LLC

Principal Place of Business

**11940 US. HWY. ONE, STE. #200
 N. PALM BEACH FL 33408**

Mailing Address

**11940 US. HWY. ONE, STE. #200
 N. PALM BEACH FL 33408**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0929248

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MASON, WILLIAM J
 01940 US. HWY. ONE, STE. #200
 N. PALM BEACH FL 33408**

Name

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

11940 US HWY ONE, STE. 200

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

**FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 TEAM ONE EXHIBITOR SERVICES, INC.
 11940 US. HWY. ONE, STE. #200
 N. PALM BEACH FL 33408** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MEM
 MEB CONSULTING SERVICES, INC.
 13221 S.W. 70TH AVE.
 MIAMI FL 33156** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MEM
 TILE COUNCIL OF AMERICA, INC
 100 CLEMSON RESEARCH BLVD.
 CLEMSON SC 29633** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MEM
 IBERAMIC, INC.
 1401 NEW YORK AVE., NW, STE. #600
 WASHINGTON DC 20005** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**156 ALMERIA AVE. Suite 201
 CORAL GABLES, FL 33134** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MEM
 THE WORLD EXPOSITION OF CERAMIC TILE, INC.
 60 EAST 42ND ST., STE. 3120
 NEW YORK NY 10165** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: William J. Mason - As Pres. Team One Exh Serv. Inc. 2/20/02 561-776-0600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)