

9/9/

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 19, 2002 8:00 am
Secretary of State

09-09-2002 90007 040 ****61.25

DOCUMENT # N39897

1. Entity Name

AMERICAN VETERAN NEWSPAPER, INC.

Principal Place of Business

Mailing Address

7329 COLLINS AVE., 2ND FLOOR
 MIAMI BEACH FL 33141
 US

7329 COLLINS AVE., 2ND FLOOR
 MIAMI BEACH FL 33141
 US

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

65-0238022

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

TYSON, LAURA
930 N.W. 84TH TERRACE
MIAMI FL 33150

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

My Laura Tyson
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9-15-02

After September 13, 2002,
 min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	SMITH, STEPHEN P	
STREET ADDRESS	7435 BYRON AVENUE, #7	
CITY-ST-ZIP	MIAMI BEACH FL 33141	
TITLE	VPD	☐ Delete
NAME	BURMESTER, RUSTY	
STREET ADDRESS	1085 W. LOMITA BLVD., #32	
CITY-ST-ZIP	HARBOR CITY CA 90745	
TITLE	STD	☐ Delete
NAME	TYSON, LAURA	
STREET ADDRESS	930 N.W. 84TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33150	
TITLE	Director	☐ Delete
NAME	Tom Hammel	
STREET ADDRESS	1447 Tyler Avenue	
CITY-ST-ZIP	Hollywood, FL 33020	
TITLE	Director	☐ Delete
NAME	Robert Sniffen	
STREET ADDRESS	2041 E. Grand Ave., Suite A-20	
CITY-ST-ZIP	Escondido, CA 92027	
TITLE	Director	☐ Delete
NAME	Patricia N. Rash	
STREET ADDRESS	2995 1st Street	
CITY-ST-ZIP	San Diego, CA 92103	

TITLE	Director	☐ Change ☐ Addition
NAME	Diana Danis	
STREET ADDRESS	2902 Irving Street	
CITY-ST-ZIP	Denver, CO 80211	
TITLE	Director	☐ Change ☐ Addition
NAME	Vince Rios	
STREET ADDRESS	71 Stevenson Street	
CITY-ST-ZIP	San Francisco, CA 94105	
TITLE	Director	☐ Change ☐ Addition
NAME	Stephanie Wooters	
STREET ADDRESS	4609-3 East Via La Paloma	
CITY-ST-ZIP	Orange, CA 92869	
TITLE	Director	☐ Change ☐ Addition
NAME	Katrina Lorenzetti	
STREET ADDRESS	9922 Norlain Avenue	
CITY-ST-ZIP	Downey, CA 90240	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen P Smith
 Signature

3-867-4321

9-15-02 Daytime Phone #

CR2E037 (4/02)