

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005402

1. Entity Name

FORT LAUDERDALE SCREAMERS, INC.

FILED

May 13, 2000 8:00 am
Secretary of State

05-13-2000 90019 015 ****61.25

Principal Place of Business

Mailing Address

3540 SW 15TH STREET
FT LAUDERDALE FL 33312

3540 SW 15TH STREET
FT LAUDERDALE FL 33312-3513

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0783196

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SHELDON GOLDING, P.A.
800 SE 3RD AVENUE SUITE 300
FORT LAUDERDALE FL 33316

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

FILE NOW:
FEE IS \$61.25

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 D ☐ Delete
NAME MCKINLEY, ELIZABETH
STREET ADDRESS 3519 SW 15TH CT
CITY-ST-ZIP FT LAUDERDALE FL 33312

TITLE ☐ Change ☒ Addition
NAME Regina Steinbeck
STREET ADDRESS 1990 Riverland Rd.
CITY-ST-ZIP Ft. Laud., FL 33312

TITLE D ☐ Delete
NAME HILL, ERIN
STREET ADDRESS 3540 SW 15TH ST
CITY-ST-ZIP FT LAUDERDALE FL 33312

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

TITLE VPD ☐ Delete
NAME STARR, ROBERT
STREET ADDRESS 1941 SW 36 AVENUE
CITY-ST-ZIP FT LAUDERDALE FL 33312

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

TITLE TD ☒ Delete
NAME MEKEEVER, JOANNE
STREET ADDRESS 3110 SW 20 ST.
CITY-ST-ZIP FT LAUDERDALE FL 33312

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

TITLE PD ☐ Delete
NAME HILL, MITCH
STREET ADDRESS 3540 SW 15TH ST.
CITY-ST-ZIP FORT LAUDERDALE FL 33312

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 of Mitch Hill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mitch Hill 4/24/00 954 587-0534

CR2E037 (9/99)