

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000027832

1. Entity Name

AMERICAN ARTS, INC.

FILED

Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90050 049 ***150.00

Principal Place of Business

3864 SHERIDAN STREET
HOLLYWOOD FL

Mailing Address

3864 SHERIDAN STREET
HOLLYWOOD FL

2. Principal Place of Business

7600 N.W. 50th Street

3. Mailing Address

3864 Sheridan Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lauderhill, FL

City & State

Hollywood, FL

4. FEI Number

65-0992838

Applied For

Not Applicable

Zip

Country

US

Zip

33021

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SIMONS, DAVID J
3864 SHERIDAN STREET
HOLLYWOOD FL

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, 2001 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 PD
NAME DODD, TONY
STREET ADDRESS 625
CITY-ST-ZIP HOLLYWOOD FL 33064 ☐ Delete

TITLE DV
NAME GREEN, JOHN
STREET ADDRESS 8824 PARADISE DRIVE
CITY-ST-ZIP TAMARACOD FL 33321-4104 ☐ Delete

TITLE DST
NAME SIMONS, DAVID J
STREET ADDRESS 3864 SHERIDAN STREET
CITY-ST-ZIP HOLLYWOOD FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME DODD, TONY
STREET ADDRESS 625 NW 38 Court
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE VD ☒ Change ☐ Addition
NAME GREEN, JOHN
STREET ADDRESS Bldg. 23, Unit 104
CITY-ST-ZIP 7925 Fairview Dr.
Tamarac, FL 33321

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

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)