

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90265 040 \*\*\*150.00

**DOCUMENT #** P00000032169 ✓  
**1. Entity Name** MOBILE BILLBOARD ADVERTISING, CORP

**Principal Place of Business** Mailing Address  
 7286 NW 68<sup>th</sup> DRIVE.  
 PARKLAND, FL. 33067.

**2. Principal Place of Business** AS ABOVE

**3. Mailing Address** Suite, Apt. #, etc.

**City & State** City & State

**Zip** Country **Zip** Country

**4. FEI Number** 65-102.0592. **Applied For** Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

SPIVAK & CAPLAN  
 12000 BISCAYNE BLVD. #803  
 MIAMI, FL. 33170

## 7. Name and Address of New Registered Agent

**Name** ROBERT E. LANDER  
**Street Address (P.O. Box Number is Not Acceptable)** 7286 NW 68<sup>th</sup> DRIVE  
**City** PARKLAND **FL** **Zip Code** 33067.

**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**  **5/05/01.**  
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** ☐ **\$5.00 May Be Added to Fees**  
 Trust Fund Contribution.

## 11. OFFICERS AND DIRECTORS

**TITLE** DIRECTOR ☒ **Delete**  
**NAME** JOSEPH DAVAU  
**STREET ADDRESS** 12000 BISCAYNE BLVD. #803  
**CITY-ST-ZIP** MIAMI FL. 33181

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

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**CITY-ST-ZIP**

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**CITY-ST-ZIP**

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

**TITLE** DIRECTOR, PRESIDENT ☒ **Change** ☐ **Addition**  
**NAME** CECIL LANDER  
**STREET ADDRESS** 7286 NW 68 DRIVE  
**CITY-ST-ZIP** PARKLAND, FL 33067.

**TITLE** DIRECTOR, SECTY TREASURER ☒ **Change** ☐ **Addition**  
**NAME** MICHAEL KAUFMAN  
**STREET ADDRESS** 26 ROBIN DRIVE  
**CITY-ST-ZIP** WASHINGTON PA. 15301.

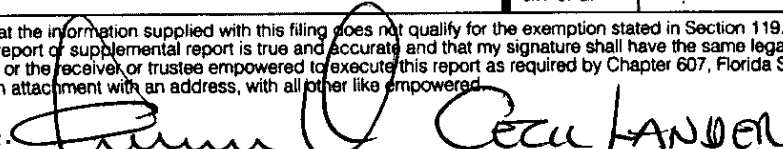
**TITLE** ☐ **Change** ☐ **Addition**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ **Change** ☐ **Addition**  
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**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:**  **5/04/01** **954-340-4669**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (11/00)