

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000037111

1. Entity Name

WORLD GATEWAY SERVICE, COMMUNICATIONS & MARKETIN

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90111 004 ***150.00

Principal Place of Business

Mailing Address

2541 ARAGON BLVD #112
SUNRISE FL 33322

2541 ARAGON BLVD #112
SUNRISE FL 33322

2. Principal Place of Business

2501 NE 11 STREET

3. Mailing Address

2501 NE 11 STREET

Suite, Apt. #, etc.

PENTHOUSE B

Suite, Apt. #, etc.

PENTHOUSE B

City & State

FT LAUDERDALE FL

City & State

FT LAUDERDALE FL

Zip

33304

Country

USA

Zip

33304

Country

USA

4. FEI Number

65-1004834

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SANTORELLI, ROBERT
2541 ARAGON BLVD #112
SUNRISE FL 33322

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	D	<input checked="" type="checkbox"/> Delete
NAME	SANTORELLI, ROBERT	
STREET ADDRESS	2541 ARAGON BLVD #112	
CITY-ST-ZIP	SUNRISE FL 33322	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAURA M HUGHES	
STREET ADDRESS	2501 NE 11 STREET - PENTHOUSE B	
CITY-ST-ZIP	FT LAUDERDALE, FL 33304	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

Laura M Hughes LAURA M HUGHES

Date

4-27-01

Daytime Phone #

914-715-2289

CR2E034 (10/00)

0505248