

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000046537

1. Entity Name

MERCURY MASTERS, INC.

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90132 044 ***150.00

Principal Place of Business

6260 N.W. 18TH STREET
MARGATE FL 33063

Mailing Address

6260 N.W. 18TH STREET
MARGATE FL 33063

2. Principal Place of Business

1775 Blount Rd. #417

Suite, Apt. #, etc.

3. Mailing Address

1775 Blount Rd. #417

Suite, Apt. #, etc.

City & State

Pompano Beach, Florida

City & State

Pompano Beach, Florida

4. FEI Number

65-1006308

Applied For

Not Applicable

Zip

33069

Country

USA

Zip

33069

Country

USA

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

NASO, CHERYL

6260 N.W. 18TH STREET
MARGATE FL 33063

Name Cheryl Naso

Street Address (P.O. Box Number is Not Acceptable)

1420 Lakeview Circle

City

Coral Springs

FL

Zip Code

33071

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME RICKER, RANDALL
STREET ADDRESS 6260 N.W. 18TH STREET
CITY-ST-ZIP MARGATE FL 33063

TITLE P ☒ Change ☐ Addition
NAME Randall K. Ricker
STREET ADDRESS 1775 Blount Road #417
CITY-ST-ZIP Pompano Beach, Florida 33069

TITLE V ☒ Delete
NAME LEWIS, PERRY
STREET ADDRESS 2033 N.W. 191ST AVENUE
CITY-ST-ZIP PEMBROKE PINES FL 33029

TITLE V-S-T ☒ Change ☐ Addition
NAME Cheryl Naso
STREET ADDRESS 1775 Blount Road #417
CITY-ST-ZIP Pompano Beach, Florida 33069

TITLE S ☐ Delete
NAME NASO, CHERYL
STREET ADDRESS 6260 N.W. 18TH STREET
CITY-ST-ZIP MARGATE FL 33063

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

TITLE T ☒ Delete
NAME LEWIS, ANGELA
STREET ADDRESS 2033 N.W. 191ST AVENUE
CITY-ST-ZIP PEMBROKE PINES FL 33029

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

TITLE ☐ Delete
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

RANDALL Ricker - Pres. 4/7/01 954-977-4010

CR2E034 (10/00)