

# 2001 UNIFORM BUSINESS REPORT (UBR)

08-01-2001 90191 011\*\*\*\*15000  
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pg 1 of 2  
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DOCUMENT # P00000050245

1. Entity Name  
AUDIO VIDEO LIFESTYLES, INCORPORATED

FILED

01 AUG 13 AM 4:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
1014 CHANDLER OAKS DRIVE  
JACKSONVILLE FL 32221

Mailing Address  
1014 CHANDLER OAKS DRIVE  
JACKSONVILLE FL 32221

2. Principal Place of Business  
7999 PHILLIPS HIGHWAY  
Suite, Apt. #, etc.  
SUITE 211  
City & State  
JACKSONVILLE, FLORIDA  
Zip  
32256  
Country  
USA

3. Mailing Address  
7999 PHILLIPS HIGHWAY  
Suite, Apt. #, etc.  
SUITE 211  
City & State  
JACKSONVILLE, FLORIDA  
Zip  
32256  
Country  
USA

4. FEI Number  
59-3650378  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
AKEL, DANIEL D  
ONE INDEPENDENT DRIVE  
SUITE 2301  
JACKSONVILLE FL 32202

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 \_\_\_\_\_ (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 \$550.00  
After September 12, 2001 Fee will be \$750.00  
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	D	<input type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAVES, MICHAEL		NAME	GRAVES, MICHAEL	
STREET ADDRESS	1014 CHANDLER OAKS DRIVE		STREET ADDRESS	11247-1222 SAN JOSE BLVD	
CITY-ST-ZIP	JACKSONVILLE FL 32221		CITY-ST-ZIP	JACKSONVILLE, FLORIDA 32223	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LORAH, RICK		NAME		
STREET ADDRESS	1014 CHANDLER OAKS DRIVE		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32221		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: Michael Graves PRESIDENT MICHAEL GRAVES 7/24/2001 904-7332856  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

# Audio Video Lifestyles, Inc.

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## To Whom It May Concern:

Audio Video Lifestyles, Inc. is a new corporation and we have just completed our first year in business. This notice to pay a penalty fee was just received in the mail. Unfortunately, we never received a first notice and since this is our first year in business, we simply were not aware that any such documents and corresponding \$150 fee were due back in May.

I have spoken with a representative at the Division of Corporations who has instructed me to write this letter. We are requesting a waiver of the additional penalty fees in light of the information presented in this letter. We have been told by your representative that the original fee was \$ 150.00 and to include that with this correspondence. Please notify us at 1-904-733-2856 as soon as possible if we absolutely have to pay the full \$550.00 amount and we will submit the balance due. Your understanding would be greatly appreciated.

In closing, please note that we have changed the "Principle Place of Business" address, our "Mailing Address" and company President, Michael Graves' "Mailing Address" as these are all incorrect. I suspect that this issue contributed to the fact that we never received the first notice.

Thank you,



Michael Graves, President  
Audio Video Lifestyles, Inc.