

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90327 009 ***150.00

DOCUMENT # P00000052122

1. Entity Name
DANCE DEFINED, INC.

Principal Place of Business
8087 SOUTH DIXIE HIGHWAY
MIAMI FL 33143

Mailing Address
8087 SOUTH DIXIE HIGHWAY
MIAMI FL 33143

2. Principal Place of Business

8087 SOUTH DIXIE HIGHWAY
 Suite, Apt. #, etc.

SUITE A2

City & State
MIAMI, FL

Zip
33143

Country
USA

3. Mailing Address

8087 SOUTH DIXIE HIGHWAY
 Suite, Apt. #, etc.

SUITE A2

City & State
MIAMI, FL

Zip
33143

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1018261

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

CORMIER, LINDA K
8087 SOUTH DIXIE HIGHWAY
MIAMI FL 33143

7. Name and Address of New Registered Agent

Name **CORMIER, LINDA K**

Street Address (P.O. Box Number is Not Acceptable)
8087 SOUTH DIXIE HIGHWAY
SUITE A2

City **MIAMI**

FL

Zip Code
33143

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** ☐ Delete
 NAME **CORMIER, LINDA K**
 STREET ADDRESS **8087 SOUTH DIXIE HIGHWAY**
 CITY-ST-ZIP **MIAMI FL 33143**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **CORMIER, LINDA K**
 STREET ADDRESS **8087 SOUTH DIXIE HIGHWAY SUITE A2**
 CITY-ST-ZIP **MIAMI FL 33143**

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

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 an other like empowered.

SIGNATURE: **LINDA CORMIER** 2-27-01 (305) 498-8529
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)