

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91037 040 ***158.75

DOCUMENT # P00000072282

1. Entity Name
ANCHORMINOTT INC.



Principal Place of Business
**7030 SW 24 CT
MIRAMAR FL 33023**

Mailing Address
**7030 SW 24 CT
MIRAMAR FL 33023**

2. Principal Place of Business

2221 SHERMAN CIRCLE

3. Mailing Address

P.O. BOX 834986

Suite, Apt. #, etc.

E-204

Suite, Apt. #, etc.

City & State
MIRAMAR, FL.

City & State
HOLLYWOOD, FL.

Zip
33025

Country
USA

Zip
33083-4986

Country
USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1033336**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**MINOTT, ANDREW
7030 SW 24 CT
MIRAMAR FL 33023**

7. Name and Address of New Registered Agent

Name **ANDREW MINOTT**

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

4613 BISON ST.

City **BOCA RATON**

FL

Zip Code **33428**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **ANDREW MINOTT**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/4/03

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MINOTT, ANDREW**
STREET ADDRESS **7030 SW 24 CT**
CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE **D** ☐ Delete
NAME **ESCOFFERY, DELROY**
STREET ADDRESS **7516 SW 6TH CT**
CITY-ST-ZIP **N LAUDERDALE FL 33068**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **ANDREW MINOTT**
STREET ADDRESS **4613 BISON ST.**
CITY-ST-ZIP **BOCA RATON, FL. 33428**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **ANDREW MINOTT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/03

Date

(954) 445-0223

Daytime Phone #

CR2E034 (10/02)