

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90064 028 ***150.00

DOCUMENT # P00000092952

1. Entity Name

HORIZON MEDIA GROUP, INC.

Principal Place of Business

**2655 LEJEUNE ROAD PENTHOUSE II
 CORAL GABLES FL 33134**

Mailing Address

**2655 LEJEUNE ROAD PENTHOUSE II
 CORAL GABLES FL 33134**

2. Principal Place of Business

8485 NW 29 ST

3. Mailing Address

10520 NW 26TH STREET

Suite, Apt. #, etc.

Miami FL

Suite, Apt. #, etc.

SUITE C-201

City & State

City & State

MIAMI, FL

Zip

33122

Country

U.S.

33172

Country

U.S.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1846933

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SUTTON, JOHN O ESQ
 C/O JOHN O. SUTTON, P.A.
 2655 LEJEUNE ROAD PENTHOUSE II
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

JOSEPH F. CABANIAS

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

10520 NW 26TH STREET (SUITE C-201)

City

Miami

FL

Zip Code

33172

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)

4/25/02

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, 2002 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	D	<input type="checkbox"/> Delete
NAME	DE COIRAN, BEATRIZ	
STREET ADDRESS	4122 NW 60TH CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE	D	<input type="checkbox"/> Delete
NAME	COIRAN, DAVID	
STREET ADDRESS	4122 NW 60TH CIRCLE	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

DATE

(305) 640-9600

DAYTIME PHONE #

CR2E034 (9/01)