

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
 04-10-2001 90032 049 ***158.75

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DOCUMENT # P00000100372

1. Entity Name

PROJECT DESTINY, INC.

Principal Place of Business

9900 STIRLING ROAD
 THE CENTRE
 COOPER CITY FL 33024

Mailing Address

9900 STIRLING ROAD
 THE CENTRE
 COOPER CITY FL 33024

00033252



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

The Centre, 9900 Stirling Rd.

Suite, Apt. #, etc.
Cooper City, FL.
 City & State

3. Mailing Address

The Centre, 9900 Stirling Rd.

Suite, Apt. #, etc.
Cooper City, FL
 City & State

4. FEI Number

65-1070129

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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

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 *PD*
 NAME *Carter, Nicole L*
 STREET ADDRESS
 CITY-ST-ZIP
 COOPER CITY FL 33024
☐ Delete
please change this last name error to Carter.

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VTSD
 MAJORS, NATALIE C
 9900 STIRLING ROAD
 COOPER CITY FL 33024
☐ Delete

TITLE
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 CITY-ST-ZIP
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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☐ Change ☐ Addition

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:

Nicole Carter
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/5/2001 - 954-431-5800

CR2E034 (10/00)