

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 26, 2001 8:00 am
Secretary of State

07-26-2001 90008 009 ***150.00

DOCUMENT # **P000000110357**

1. Entity Name

GDA Multimedia Solutions, Inc.

Principal Place of Business Mailing Address

8930 State Rd. #124

Davil, Fl. 33324

00074393

2. Principal Place of Business 3. Mailing Address

8930 State Rd. 84

Suite, Apt. #, etc.

124

Suite, Apt. #, etc.

City & State

Davil, Fl.

City & State

Davil, Fl.

Zip

33324

Country

USA

Zip

33324

Country

USA

4. FEI Number

65-1056178

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PEREZ BEHAR & ASSOC., P.A.

**13935 NW 1st AVENUE
 MIAMI, FLORIDA 33168**

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

Barmon R. P. / P. / P.

4-23-01

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

Pay 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 **Gustavo D Arango** ☐ Delete
 STREET ADDRESS **8930 State Rd # 124**
 CITY-ST-ZIP **Davil, Fl. 33324**

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
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TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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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:

Gustavo D Arango
 P. / P.

4/23/01

954-648-5118

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

GDA Multimedia Solutions

attachment
#40000110357

I am in receipt of the notice of non-renewal, but I sent it since 04-24-01 with check # 1023 for \$150. I checked with my bank and the check had not cleared so I put a stop payment on the check and I am reissuing one. I am attaching copies of the original report sent which was done by hand since I never got the first one and my accountant provided a blank one.

C 0074393

Thank you,

Gustavo D. Arango