

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 13, 2001 8:00 am**  
**Secretary of State**

09-13-2001 90016 007 \*\*\*550.00

**DOCUMENT # P00000116251**

1. Entity Name  
**AUDIENCEBANK MEDIA, INC.**

Principal Place of Business  
**110 E BROWARD BLVD. STE 610**  
**FT LAUDERDALE FL 33301**

Mailing Address  
**110 E BROWARD BLVD. STE 610**  
**FT LAUDERDALE FL 33301**

2. Principal Place of Business  
**313 Barbados Drive**

3. Mailing Address  
**4521 PGA Blvd.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Jupiter, FL**

City & State  
**Palm Beach Gardens, FL**

Zip  
**33458**

Country  
**USA**

Zip  
**33418**

Country  
**USA**

4. FEI Number  
**65-0960071**

Applied For  
☐ Not Applicable

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

## 6. Name and Address of Current Registered Agent

**PERRI, PETER III**  
**110 E BROWARD BLVD, STE 610**  
**FT LAUDERDALE FL 33301**

## 7. Name and Address of New Registered Agent

Name **Same**  
 Street Address (P.O. Box Number is Not Acceptable)  
**313 Barbados Drive**  
 City **Jupiter** **FL** Zip Code **33458**

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 **X** **Peter Perri, CEO** **9-6-01**  
 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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>PERRI, PETER III</b>	<b>110 E BROWARD BLVD, STE 610</b>	<b>FT LAUDERDALE FL 33301</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>Peter Perri III</b>	<b>313 Barbados Drive</b>	<b>Jupiter, FL 33458</b>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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: **X** **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**9-6-01** **561-626-5320**

Date

Daytime Phone #

CR2E034 (5/01)