

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

04-17-2002 90092 012 ***150.00

DOCUMENT # P01000022403

1. Entity Name
 SOUTHERN COMMUNICATION SYSTEM INC

Principal Place of Business
 52-67 N DIXIE HWY STE C-2
 FT LAUDERDALE FL 33334

Mailing Address
 52-67 N DIXIE HWY STE C-2
 FT LAUDERDALE FL 33334

2. Principal Place of Business

52-09 N. Dixie Hwy

3. Mailing Address

52-09 N. Dixie Hwy

Suite, Apt. #, etc.

B1

Suite, Apt. #, etc.

B1

City & State

FT. Lauderdale FL

City & State

FT. Lauderdale FL

Zip

33334

Country

Browards

Zip

33334

Country

4. FEI Number

65-1091034

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

APONTE, DUANE
 52-67 N DIXIE HWY STE C-2
 FT LAUDERDALE FL 33334

7. Name and Address of New Registered Agent

Name: APONTE, Duane
 Street Address (P.O. Box Number is Not Acceptable):
 52-09 N. Dixie Hwy STE B1
 FT. Lauderdale FL 33334
 City: FT. Lauderdale FL Zip Code: 33334

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 DA

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

(NOTE: Registered Agent signature required when reinstating)

01/08/02

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP APONTE, DUANE 52-67 N DIXIE HWY STE C-2 FT LAUDERDALE FL 33334	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO APONTE, DUANE 52-67 N DIXIE HWY STE C-2 FT LAUDERDALE FL 33334	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP APONTE, Duane 52-09 N. Dixie Hwy STE B1 FT. Lauderdale FL, 33334	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO APONTE, Duane 52-09, N. Dixie Hwy STE B1 FT. Lauderdale, FL. 33334	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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: DA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/02

Date

954-444-0447

Daytime Phone #

CR2E034 (9/01)