

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 03, 2002 8:00 am
Secretary of State

05-15-2002 90151 047 ***150.00

DOCUMENT # P01000065157

1. Entity Name

AUTHENTIC VIDEO SERVICES, INC.

Principal Place of Business

240 BOBWHITE RD
ROYAL PALM EACH FL 33411

Mailing Address

240 BOBWHITE RD
ROYAL PALM EACH FL 33411

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1118594

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

SPiegel & UTRERA, PA.
1840 SW 22 ST, 4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name

Kimberly Boomhower

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

240 Bobwhite Road

City

Royal Palm Beach**FL**

Zip Code

33411

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

Kimberly M. Boomhower**Kimberly M. Boomhower****5-30-02**

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, 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

PD ☐ Delete
BOOMHOWER, KIMBERLY M
240 BOBWHITE RD
ROYAL PALM EACH FL 33411
VD ☐ Delete
BARTONE, TAMMY
240 BOBWHITE RD
ROYAL PALM EACH FL 33411
SD ☐ Delete
NEJBAUER, MARCIA
240 BOBWHITE RD
ROYAL PALM EACH FL 33411
☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kimberly M. Boomhower**Kimberly M. Boomhower**

Date

4/26/02

Daytime Phone #

561 333 6667

CR2E034 (9/01)