## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 09, 2002 8:00 am Secretary of State P01000067696 DOCUMENT # 1. Entity Name 05-09-2002 90018 045 \*\*\*150.00 BRAINSTORMING ADVERTISING, INC. Principal Place of Business Mailing Address 8850 FOUNTAINEBLEAU BLVD. 8850 FOUNTAINEBLEAU BLVD. STF 400 **STE 402** MIAM! FL 33172 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 651125443 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ZOTA, MANUEL A Street Address (P.O. Box Number is Not Acceptable) 8850 FOUNTAINEBLEAU BLVD. **STE 402** Zip Code **MIAMI FL 33172** 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. (See criteria on back) After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS :11. 12. TITLE ☐ Delete TITLE VS. NAME ZOTA, MANUEL NAME MARIO ALBERTO ARIZA 8850 FOUNTAINEBLEAU BLVD. STE 402 STREET ADDRESS STREET ADDRESS 8850 POUNTAINBLEAU BLUD. STE 402 CITY-ST-ZIP **MIAMI FL 33172** CITY-ST-7/P JETCE 27 IMAIN TITLE ☐ Change ☐ Addition Delete TITLE NAME HERNANDEZ. NORBERTO NAME STREET ADDRESS STREET ADDRESS 8850 FOUNTAINEBLEAU BLVD. STE 402 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change ☐ Addition ■ Delete TITLE TD NAME\_ NAME ARIZA, JOHN: STREET ADDRESS STREET ADDRESS 8850 FOUNTAINEBLEAU BLVD. STE 402 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33172 ☐ Change ☐ Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.

04/18/02 3054674937

**FILED**