

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 30, 2002 8:00 am**  
**Secretary of State**

DOCUMENT # **P01000101865**

1. Entity Name

**BUSINESS & PERSONAL ACTIVITIES ON LINE, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

**1445 NW 6TH AVENUE  
 FT LAUDERDALE FL 33311**

Mailing Address

**1445 NW 6TH AVENUE  
 FT LAUDERDALE FL 33311**

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

**65-1148673**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROWN, MAUDY**

**1445 NW 6TH AVENUE**

**FT LAUDERDALE FL 33311**

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME **President**  
 STREET ADDRESS **Maudy Brown**  
 CITY-ST-ZIP **1445 NW 6 Ave**  
**Fort Lauderdale FL 33311**

TITLE ☐ Delete  
 NAME **Vice President**  
 STREET ADDRESS **Stephany Walden**  
 CITY-ST-ZIP **3316 Farragut St**  
**Hollywood Fl 33024**

TITLE ☐ Delete  
 NAME **Treasurer**  
 STREET ADDRESS **Andrea Hadden**  
 CITY-ST-ZIP **832 NW 81 Ave**  
**Plantation Fl 33324**

TITLE ☐ Delete  
 NAME **Asst. Treasurer**  
 STREET ADDRESS **Clifton Rouse**  
 CITY-ST-ZIP **1801 NE 33rd St**  
**Fort Lauderdale Fl 33334**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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.

SIGNATURE:

**Maudy Brown** **5/23/02** **934-630-870**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

0316685 AV

Attachment  
Document #  
PO1000101865  
B01210340

Cancel This Check  
#1010 As per Scott  
lost in the mail

Business and Personal  
Activities on Line

New Check 1017

65-1148673

Thank you  
Mandy Brown