

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90199 013 ***150.00

DOCUMENT # P01000105723

1. Entity Name
AMELIA GARDENS, INC.

Principal Place of Business Mailing Address
2940 SW 189 TERR. 2940 SW 189 TERR.
MIRAMAR FL 33029 MIRAMAR FL 33029

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 Applied For
030394232 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

SPELL, KAREN R ESQ.
12930 NW 18TH ST.
PEMBROKE PINES FL 33026

Name
 Street Address (P.O. Box Number is Not Acceptable)
2525 EMBASSY DRIVE
Suite #2
 City **Cooper City** **FL** Zip Code
33026

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (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 13, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D GERMANO, MICHAEL 2940 SW 189 TERR. MIRAMAR FL 33029	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D SIMMS, JOHN S 19730 NE 14 AVE. MIAMI FL 33179	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> 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]* Date: **8-2-02** Davtime Phone #: **8544330023**

CR2E034 (4/02)

Attachment

973436

Amelia Gardens, Inc.
P.O. Box 7521
Miramar, Fl. 33027-7521

Division Of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Re: Late Fee waiver

801000105723

This is the first notice that I received.
This is my first filing, I did not know when to expect this.
My registered agent has also moved, the form has the new address.
Please waive the late fee as allowed under 607.193 (2) (b).

Thank You


Michael Germano-Director

[Handwritten signature]

