

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90141 030 ***550.00

0139707 AT

DOCUMENT # P02000054206

1. Entity Name

CAV NETWORK GROUP, INC.



Principal Place of Business

106 CHURCH AVENUE
BRADENTON BEACH FL 34217

Mailing Address

106 CHURCH AVENUE
BRADENTON BEACH FL 34217

2. Principal Place of Business

105 13th ST. South

Suite, Apt. #, etc.

3. Mailing Address

105 13th ST. South

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
BRADENTON BEACH FLA.

City & State
BRADENTON BEACH FLA.

4. FEI Number

020604422

Applied For

Not Applicable

Zip
34217

Country
USA

Zip
34217

Country
USA

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

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI FL 33145

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
VRABEL, CHARLES A
106 CHURCH AVENUE
BRADENTON BEACH FL 34217
Delete ☐

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Change ☐ Addition ☐

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
VRABEL, CHARLES A
105 13th ST S. BRADENTON BEACH FL
Delete ☐

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Change ☐ Addition ☐

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Delete ☐

TITLE
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Delete ☐

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CITY - ST - ZIP
Change ☐ Addition ☐

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

CHARLES A VRABEL PSTD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 20 03 941 778
7070

Date

Daytime Phone #

CR2E034 (4/03)