

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90203 032 ***150.00

DOCUMENT # P02000082771

1. Entity Name
PRO BASS ELECTRONICS, INC.



Principal Place of Business
**3161 W. OAKLAND PARK BLVD
915
FORT LAUDERDALE FL 33311**

Mailing Address
**3161 W. OAKLAND PARK BLVD
915
FORT LAUDERDALE FL 33311**

90008768



2. Principal Place of Business
3161 W. Oakland Park Blvd.

3. Mailing Address

Suite, Apt. #, etc.
915

Suite, Apt. #, etc.

City & State
Fort Lauderdale FL 33311

City & State

4. FEI Number
043702962

Applied For
Not Applicable

Zip
33311

Country
Broward

Zip

Country

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

**KASMAI, ALI F P
3161 W. OAKLAND PARK BLVD
915
FORT LAUDERDALE, FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/03 954-735-0328

Date Daytime Phone #

CR2E034 (10/02)