

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2003 8:00 am
Secretary of State

04-30-2003 90087 006 ***150.00

DOCUMENT # P02000112269			
1. Entity Name A.H. MATTHEWS & ASSOCIATES, INC.			
Principal Place of Business 3901 SW 47 AVE STE 402 FT LAUDERDALE FL 33314		Mailing Address 3901 SW 47 AVE STE 402 FT LAUDERDALE FL 33314	
2. Principal Place of Business <u>SAME</u>		3. Mailing Address <u>SAME</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 30-012284		☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MATTHEWS, ALAN H 514 SOUTH 24 AVE HOLLYWOOD FL 33020		7. Name and Address of New Registered Agent Name <u>SAME</u> Street Address (P.O. Box Number is Not Acceptable) City <u>FL</u> 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 <u>D</u> NAME <u>MATTHEWS, ALAN H</u> STREET ADDRESS <u>3901 SW 47 AVE STE 402</u> CITY-ST-ZIP <u>FT LAUDERDALE FL 33314</u>	☐ Delete	TITLE <u>D/P</u> NAME <u>MATTHEWS, ALAN H</u> STREET ADDRESS <u>3901 SW 47 AVE STE 402</u> CITY-ST-ZIP <u>FT LAUDERDALE FL 33314</u>	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE <u>V</u> NAME <u>LOCASCIO, JOHN</u> STREET ADDRESS <u>3901 SW 47 AVE STE 402</u> CITY-ST-ZIP <u>FT LAUDERDALE, FL 33314</u>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE <u>T</u> NAME <u>PELUSO, BART</u> STREET ADDRESS <u>3901 SW 47 AVE STE 402</u> CITY-ST-ZIP <u>FT LAUDERDALE, FL 33314</u>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE <u>S</u> NAME <u>CHASE, CHRISTIAN D.</u> STREET ADDRESS <u>3901 S.W. 47 AVE STE 402</u> CITY-ST-ZIP <u>FT LAUDERDALE, FL 33314</u>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS 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: <u>ALAN H. MATTHEWS</u> <u>4/28/03</u> <u>954-791-8882</u>			

Correction

55042018

CR2E034 (10/02)