

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000097356

1. Entity Name
INTERLAND ASSOCIATES, INC.



Principal Place of Business

1 SE 3RD AVE
10TH FLOOR
MIAMI, FL 33131

Mailing Address

1 SE 3RD AVE
10TH FLOOR
MIAMI, FL 33131

FILED
Jul 15, 2008 08:00 AM
Secretary of State



06242008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0397501

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TEW, THOMAS
1441 BRICKWELL AVE, 14TH FLOOR
MIAMI, FL 33143

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BRADLEY, MARTIN J
STREET ADDRESS	6855 SW 81 ST
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	VST
NAME	BRADLEY, MARTIN J III
STREET ADDRESS	6855 SW 81 ST
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	ALFONSO, MARTA
STREET ADDRESS	1 SE 3RD AVE - 10TH FLOOR
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000954929
07/15/08-80004-001 550.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 persons empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305.377.4228