

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000010339

Entity Name

NEXT AUTHENTIC, INC.

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90362 032 ***150.00

Principal Place of Business

Mailing Address

834 S. OCEAN DRIVE
MIAMI BEACH FL 33139

834 S. OCEAN DRIVE
MIAMI BEACH FL 33139

2. Principal Place of Business

700 S. Rosemary Ave.

3. Mailing Address

700 S. Rosemary Ave.

Suite, Apt. #, etc.

#132

Suite, Apt. #, etc.

#132

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33401

Country

Palm Beach

Zip

33401

Country

Palm B

4. FEI Number 65-0392543

Applied For

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

CHESAL, MICHAEL
MIAMI CENTER, SEVENTEENTH FLOOR
201 SOUTH BISCAYNE BOULEVARD
MIAMI FL 33131

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.

SIGNATURE

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

(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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE PST
NAME ANIDJAR, SAMUEL ☐ Delete
STREET ADDRESS 834 S. OCEAN DRIVE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE VD
NAME ANIDJAR, ETTY ☐ Delete
STREET ADDRESS 834 S. OCEAN DRIVE
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PST ☒ Change ☐ Addition
NAME Onidjar, Samuel
STREET ADDRESS 700 S. Rosemary Ave #132
CITY-ST-ZIP West Palm Beach, FL 33401

TITLE VD ☒ Change ☐ Addition
NAME Onidjar, ETTY
STREET ADDRESS 700 S. Rosemary Ave. #132
CITY-ST-ZIP West Palm Beach, FL 33401

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

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

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

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

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)