

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000033160

1. Entity Name

PROMED PRODUCTIONS, INC.

FILED

Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90371 006 ***150.00

Principal Place of Business

5610 PGA BLVD
SUITE 114
PALM BEACH GARDENS FL 33418
US

Mailing Address

5610 PGA BLVD
SUITE 114
PALM BEACH GARDENS FL 33418-3838
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0405447

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

SABATELLO, CARL M
5610 PGA BLVD SUITE 114
PALM BEACH GARDENS FL 33418

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVP	<input type="checkbox"/> Delete
NAME	GRABEL, JORDAN	
STREET ADDRESS	5610 PGA BLVD SUITE 114	
CITY-ST-ZIP	PALM BEACH GARDENS FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SABATELLO, CARL M	
STREET ADDRESS	5610 PGA BLVD SUITE 114	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	SABATELLO, MICHAEL J	
STREET ADDRESS	5610 PGA BLVD SUITE 114	
CITY-ST-ZIP	PALM BCH GNDS FL	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	SABATELLO, PAUL	
STREET ADDRESS	5610 PGA BLVD SUITE 114	
CITY-ST-ZIP	PALM BCH GNDS FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SABATELLO, THEODORE	
STREET ADDRESS	5610 PGA BLVD., SUITE 114	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #