

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

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 93594 006 ***150.00

DOCUMENT # **P93000037269**
1. Entity Name
RHINO MARKETING, INC.

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| | | | |
|--|---------|---|-----------------------|
| 2. Principal Place of Business 17094-3 BOCA CLUB BLVD. | | 3. Mailing Address 1500 BEVILLE RD. | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. SUITE 606-324 | |
| City & State BOCA RATON, FL. | | City & State DAYTONA BEACH, FL. | |
| Zip 33487 | Country | Zip 32114 | Country USA |

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| 4. FEI Number 65-0412857 | Applied For <input type="checkbox"/> Not Applicable |
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
GREGORY J. BLODIG, ESQ
Street Address (P.O. Box Number is Not Acceptable)
GOLDBERG + YOUNG, P.A.
1630 NORTH FEDERAL HIGHWAY
City
FORT LAUDERDALE, FL Zip Code
33305

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT, SECRETARY JAMES B. DENNY 17094-3 BOCA CLUB BLVD. BOCA RATON, FL. 33487 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VICE PRESIDENT JANNE DENNY 17094-3 BOCA CLUB BLVD. BOCA RATON, FL. 33487 |
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES B. DENNY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/02 386-405-5246
Date Daytime Phone #

CR2E034B (12/01)