

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000041156

1. Entity Name

EMZA, INC.

FILED

00 JAN 14 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1200 S PINE ISLAND RD
SUITE 600
PLANTATION FL 33324

1200 S PINE ISLAND RD
SUITE 600
PLANTATION FL 33324-4465

2. Principal Place of Business

3. Mailing Address

725 Arizona Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

204

City & State

City & State

Santa Monica, CA

Zip

Country

Zip

Country

90401



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0421565

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

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 Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DVT ☒ Delete
NAME DICKERSON, JAMES H JR
STREET ADDRESS 3000 GALLERIA TOWER SUITE 1000
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE PDTS ☐ Change ☒ Addition
NAME John Zambetti
STREET ADDRESS 725 Arizona Ave. #204
CITY-ST-ZIP Santa Monica, CA 90401

TITLE DVS ☒ Delete
NAME FINLEY, SARA J
STREET ADDRESS 3000 GALLERIA TOWER SUITE 1000
CITY-ST-ZIP BIRMINGHAM AL 35244

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

TITLE P ☒ Delete
NAME MASSINGALE, H. LYNN
STREET ADDRESS 3000 GALLERIA TOWER SUITE 1000
CITY-ST-ZIP BIRMINGHAM AL 35244

TITLE AS ☐ Change ☒ Addition
NAME Tina Nelson
STREET ADDRESS 3000 Galleria Tower, Suite 1000
CITY-ST-ZIP Birmingham, AL 35244

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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 all other like empowered.

SIGNATURE:

Tina Nelson Ast. Secretary

1-12-00

205-733-8996

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

300003099239--1