

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90343 011 ***150.00

DOCUMENT # P93000044915

1. Entity Name

AB ADVERTISING CORPORATION

Principal Place of Business

7499 PEMBROKE RD.
 HOLLYWOOD FL 33023
 US

Mailing Address

~~7081 TAFT ST.~~
~~PMB 189~~
 HOLLYWOOD FL 33024-3803
 US

2. Principal Place of Business

3. Mailing Address

P.O. Box 848188

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

HOLLYWOOD, FL

Zip

Country

Zip

Country

33084

USA

4. FEI Number

65-0420317

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

BUTLER, ALICE U
 7081 TAFT ST.
 #189
 HOLLYWOOD FL 33024

Name

BUTLER, ALICE U.

Street Address (P.O. Box Number is Not Acceptable)

180 SW 125th Ave

City

PLANTATION

FL

Zip Code

33325

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 Alice U. Butler PRESIDENT 03-27-01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME PSM
 STREET ADDRESS BUTLER, ALICE U
 CITY-ST-ZIP 7081 TAFT ST., #189-
 HOLLYWOOD FL

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 180 SW 125th AVE
 CITY-ST-ZIP PLANTATION, FL 33325

TITLE ☐ Delete
 NAME VPTM
 STREET ADDRESS CLARK, DAVID A
 CITY-ST-ZIP 180 SW 125TH AVE
 PLANTATION FL

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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: Alice U. Butler ALICE U. BUTLER 03-27-01 (954) 981-4000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)