

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 28, 2002 8:00 am**  
**Secretary of State**

02-28-2002 90045 037 \*\*\*150.00

**DOCUMENT # P94000013427**

1. Entity Name  
**NEW RIVER TECHNOLOGIES, INC.**

Principal Place of Business

**110 E. BROWARD BLVD  
SUITE 1400  
FORT LAUDERDALE FL 33301  
US**

Mailing Address

**110 E. BROWARD BLVD  
SUITE 1400  
FORT LAUDERDALE FL 33301  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0525498**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SMITH, DENNIS D ESQ.  
C/O DENNIS D. SMITH ESQ.  
110 SE 6TH ST 15TH FLOOR  
FORT LAUDERDALE FL 33301**

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, 2002 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 **P** ☐ Delete  
NAME **BROWN, GEOGIANNE**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

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

TITLE **ASD** ☒ Delete  
NAME **ARTHUR, ROSALIE V**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FT LAUDERDALE FL 33301**

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

TITLE **ATS** ☐ Delete  
NAME **TRIPP, NORMAN D**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

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

TITLE **AT** ☐ Delete  
NAME **GARCIA, NORBERTO**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

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

TITLE **T** ☐ Delete  
NAME **ALLEN, CELESTE**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33301**

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

TITLE **C** ☐ Delete  
NAME **EGAN, MICHAEL S.**  
STREET ADDRESS **110 E. BROWARD BLVD**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

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:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Norberto Garcia**

**2/14/02**

Date

**954-522-1440**

Daytime Phone #

CR2E034 (9/01)



Attachment  
Doc# P94000013427/604464

February 12, 2002

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Uniform Business Reports (8)

Dear Sir or Madam:

Enclosed please find 8 FL 2002 Uniform Business Reports for the following corporations:

- ACV Tours, Inc.
- Certified Tours, Inc.
- Certified Vacations Group, Inc.
- CLIKtravel.com, Inc.
- Dancing Bear Group, Inc.
- Futuristic Vacations, Inc.
- FV, inc.
- New River Technologies, Inc.

Each form is accompanied by a check in the amount of \$150.00.

Thank you,

A handwritten signature in black ink, appearing to read "Brent Hollingsworth".

Brent Hollingsworth  
Tax Department

Enclosures