

2000 UNIFORM BUSINESS REPORT (UBR)

5/19/01

FILED

Jun 29, 2000 8:00 am
Secretary of State

05-19-2000 90008 014 ***158.75

DOCUMENT # P96000030852 R

1. Entity Name

~~FATH ENTERPRISES GROUP INC~~

Global Model Registry, Inc

Principal Place of Business

Mailing Address

455 DOUGLAS AVE.

SUITE 1355

ALTAMONTE SPRINGS, FL

32714

2. Principal Place of Business

455 DOUGLAS AVE.

Suite, Apt. #, etc.

SUITE 1355

City & State

ALTAMONTE SPRINGS, FL

Zip

32714

Country

USA

3. Mailing Address

455 DOUGLAS AVE

Suite, Apt. #, etc.

SUITE 1355

City & State

ALTAMONTE SPRINGS, FL

Zip

32714

Country

USA

4. FEI Number

59-3371348

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

JEFFREY A. FISCHER

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

455 DOUGLAS AVE. SUITE 1355

City

ALTAMONTE SPRINGS

FL

Zip Code

32714

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

JEFFREY A. FISCHER

4/11/00

(Signature, word or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when renouncing)

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PRESIDENT
BRIAN HAYES
405 DOUGLAS AVE
ALTAMONTE SPRINGS, FL

☒ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PRESIDENT

☒ Change

☐ Addition

JEFFREY FISCHER
1040 ABERNATHY LN APT 100
APOKA, FL 32703

V.P.

☐ Change

☒ Addition

DAVID FISCHER
1040 ABERNATHY LN APT 100
APOKA, FL 32703

DIRECTOR

☒ Change

☐ Addition

VICTOR HUSTY
711 BEAR CREEK CT.
WINTER SPRINGS, FL 32708

V.P.

☐ Change

☒ Addition

ROY L. SANDERS
7834 HEATHER LAKE CT.
JACKSONVILLE, FL 32256

DIRECTOR

☐ Change

☒ Addition

BRETT SAAL
3445 N.W. 44th ST. APT 103
OAKLAND PARK, FL 33309

DIRECTOR

☐ Change

☒ Addition

GREG BEYER
3445 N.W. 44th ST. APT 103
OAKLAND PARK, FL 33309

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

JEFFREY A. FISCHER

4/11/00

407-774-7151

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone

CR2E034 (9/99)