

2000 UNIFORM BUSINESS REPORT (UBR)

AMENDED

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS

00 OCT -6 PM 1:56

DOCUMENT # P96000046683

1. Entity Name

ARENA OPERATING COMPANY, INC.

Principal Place of Business
501 E. Camino Real
Corporate Office
Boca Raton, FL 33432

Mailing Address
P. O. Box 5025
Corporate Office
Boca Raton, FL 33431

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

65-0679603

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

American Information Services, Inc.
One S.E. Third Avenue, 27th Floor
Miami, Florida 33131

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 IN FEES \$450.00
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 D
NAME ROCHON, RICHARD ☐ Delete
STREET ADDRESS 450 E. Las Olas Blvd., 1500
CITY - ST - ZIP Ft. Lauderdale, FL 33301

TITLE V
NAME ROCHON, RICHARD ☒ Change ☐ Addition
STREET ADDRESS 450 E. Las Olas Blvd., 1500
CITY - ST - ZIP Ft. Lauderdale, FL 33301

TITLE P
NAME MUXO, ALEX ☐ Delete
STREET ADDRESS 450 E. Las Olas Blvd., 1500
CITY - ST - ZIP Ft. Lauderdale, FL 33301

TITLE ☐ Change ☐ Addition
NAME 300003423503-13
STREET ADDRESS -10/12/00--01087--005
CITY - ST - ZIP *****61-25 *****61-25

TITLE V
NAME PIERCE, WILLIAM M ☐ Delete
STREET ADDRESS 501 E. Camino Real
CITY - ST - ZIP Boca Raton, FL 33432

TITLE DV
NAME PIERCE, WILLIAM M ☐ Change ☐ Addition
STREET ADDRESS 501 E. Camino Real
CITY - ST - ZIP Boca Raton, FL 33432

TITLE ST
NAME DAURIA, STEVEN ☐ Delete
STREET ADDRESS 501 E. Camino Real
CITY - ST - ZIP Boca Raton, FL 33301

TITLE T
NAME DAURIA, STEVEN ☒ Change ☐ Addition
STREET ADDRESS 501 E. Camino Real
CITY - ST - ZIP Boca Raton, FL 33301

TITLE V
NAME HANDLEY, RICHARD L. ☐ Delete
STREET ADDRESS 450 E. Las Olas Blvd., 1500
CITY - ST - ZIP Ft. Lauderdale, FL 33301

TITLE S-V
NAME HANDLEY, RICHARD L. ☒ Change ☐ Addition
STREET ADDRESS 450 E. Las Olas Blvd., 1500
CITY - ST - ZIP Ft. Lauderdale, FL 33301

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/14/00

Date

(561) 447-5308

Daytime Phone #

CR2E034 (9/99)