

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90485 001 *****8.75
04-25-2003 90485 002 ***150.00

DOCUMENT # P97000059615

1. Entity Name
ANCHOR GROUP NETWORK, INC.



Principal Place of Business
**1235 NORTHEAST 100 STREET
MIAMI SHORES FL 33138**

Mailing Address
**1235 NORTHEAST 100 STREET
MIAMI SHORES FL 33138**



2. Principal Place of Business
7001 Biscayne Blvd.

3. Mailing Address
7001 Biscayne Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Second Floor

Second Floor

City & State

City & State

Miami, Florida

Miami, Florida

Zip

Zip

33138

Country

Dade

Country

33138

Country

Dade

4. FEI Number **65-0771363**

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DE THOMAS, SUSANA
1235 NE 100TH STREET
MIAMI FL 33138**

Name
Susana de Thomas
Street Address (P.O. Box Number is Not Acceptable)
**7001 Biscayne Blvd.
Second Floor
City Miami FL Zip Code 33138**

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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Susana de Thomas
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

January 1, 2003
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **PSTD** ☒ Delete
STREET ADDRESS **DE THOMAS, LOUIS**
CITY-ST-ZIP **1235 NORTHEAST 100 STREET
MIAMI SHORES FL 33138**

TITLE
NAME **President/Treasurer** ☒ Change ☐ Addition
STREET ADDRESS **Susana de Thomas**
CITY-ST-ZIP **7001 Biscayne Blvd. Second Floor
Miami, Florida 33138**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME **Vice President/Secretary** ☒ Change ☐ Addition
STREET ADDRESS **Louis de Thomas**
CITY-ST-ZIP **7001 Biscayne Blvd. Second Floor
Miami, Florida 33138**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Susana de Thomas*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 1, 2003
Date Daytime Phone #

CR2E034 (10/02)