

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000080720

1. Entity Name

ANTARCTICA CHARTER CORP.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90274 048 ***150.00

Principal Place of Business
2101 WEST COMMERCIAL BLVD.
SUITE 4100
FT LAUDERDALE FL 33309

Mailing Address
2101 WEST COMMERCIAL BLVD.
SUITE 4100
FT LAUDERDALE FL 33309

00053603



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0802104**

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

FORMAN, ROBERT S ESQ.
2101 WEST COMMERCIAL BLVD.
SUITE 4100
FT LAUDERDALE FL 33309

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, 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 PS
NAME HERZOG, BRIGITTE C ☐ Delete
STREET ADDRESS 3421 N BIRCH RD APT 411
CITY- ST- ZIP FT LAUDERDALE FL 33304

TITLE PS ☒ Change ☐ Addition
NAME HERZOG, BRIGITTE C
STREET ADDRESS 341 N BIRCH RD APT 411
CITY- ST- ZIP FT LAUDERDALE FL 33304

TITLE DT ☒ Delete
NAME WEBER, MARCUS A WEHINGE
STREET ADDRESS RIESBACHSTR 52
CITY- ST- ZIP ZURICH SW 8008

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: *Brigitte Herzog* BRIGITTE HERZOG

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/01 954-763 180

Date

Daytime Phone #

CR2E034 (10/00)