

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000106201

1. Entity Name

EVENT SOLUTIONS GROUP, INC.



FILED

Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90016 011 ***550.00

Principal Place of Business

1310 MADRID ST

#5

CORAL GABLES FL 33134

Mailing Address

1510 MADRID ST

#5

CORAL GABLES FL 33134

A0078740



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4013 DOUGLAS ROAD

Suite, Apt. #, etc.

SUITE #1

City & State

COCONUT GROVE, FL.

3. Mailing Address

79 ST - BOTOLPH ST

Suite, Apt. #, etc.

SUITE #1

City & State

BOSTON MA

4. FEI Number

65-0800063

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PS
NAME DOLPHIN-BADIA, WENDY
STREET ADDRESS 1510 MADRID ST #5
CITY-ST-ZIP CORAL GABLES FL 33134 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS
NAME Dolphin-Badia, Wendy ☒ Change ☐ Addition
STREET ADDRESS 79 St. Botolph St., Suite #1
CITY-ST-ZIP Boston, MA 02116

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

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

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment Doc#:

PN 000106201

MORRISON, MAHONEY & MILLER, LLP

A0078740

COUNSELLORS AT LAW

250 SUMMER STREET
BOSTON, MASSACHUSETTS 02210-1181
617-439-7500
FACSIMILE 617-439-7590

Kristin A. Cichocki
617-439-7591
kcichock@mail.mmm-m.com

September 12, 2000

Via Federal Express

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Event Solutions Group, Inc.
2000 Uniform Business Report Filing
Our File No.: F-2726

Dear Sir or Madam:

On behalf of our client, Event Solutions Group, Inc., enclosed please find a completed 2000 Uniform Business Report and check in the amount of \$550.00 for filing with the Division of Corporations.

Thank you for your prompt attention in completing this filing. Please do not hesitate to contact me if you require any additional information.

Very truly yours,

Kristin A. Cichocki

Kristin A. Cichocki

KAC/

Enclosures

cc: Wendy Dolphin-Badia
Charles A. Cook, Esq.