

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90005 020 ***150.00

DOCUMENT # P97000106482

1. Entity Name
SOTAV, INC.

Principal Place of Business
**9720 DEER LAKE ST
 JACKSONVILLE FL 32216**

Mailing Address
**9720 DEER LAKE ST
 JACKSONVILLE FL 32216
 US**



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 **59-3483566**

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

**GEORGE, RICHARD D JR
 7812 BLAKEFORD MILL LANE
 JACKSONVILLE FL 32256**

Name **RICHARD D. GEORGE, JR.**
 Street Address (P.O. Box Numbers Not Acceptable)
10150 BELLE RIVE # 1409
JACKSONVILLE, FLA. 32256
 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: Reg. stored 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BLACK, RENAE D	1552 PEACHTREE CIRCLE SOUTH	JACKSONVILLE FL 32207	<input type="checkbox"/>
ST	BLADE, GRAHAM	4241 SNONDEN LANE	JACKSONVILLE FL 32225	<input type="checkbox"/>
VO	FREEMAN, ROBERT	10367 WALDEN GLEN CT	JACKSONVILLE FL 32256	<input checked="" type="checkbox"/>
VP	MARY GEORGE	10150 Belle Rive #1409	JACKSONVILLE	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VP	MARY GEORGE	10150 BELLE RIVE # 1409	JACKSONVILLE, FLA. 32256	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: **RICHARD D. GEORGE, JR.** *Red Seal*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

3-1-01 904-996-8882

Daytime Phone #

CR2E034 (10/00)