

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90153 012 ***150.00

DOCUMENT # P98000013532

1. Entity Name

INVESTOR CONTACT SERVICES CORP.



Principal Place of Business

**4631 N. UNIVERSITY DRIVE
SUITE 314
CORAL SPRINGS FL 33067**

Mailing Address

**4631 N. UNIVERSITY DRIVE
SUITE 314
CORAL SPRINGS FL 33067**

2. Principal Place of Business

4630 N. UNIVERSITY DR.

3. Mailing Address

4630 N. UNIVERSITY DR.

Suite, Apt. #, etc.

314

Suite, Apt. #, etc.

314

City & State

CORAL SPRINGS, FL.

City & State

CORAL SPRINGS, FL.

Zip

33067

Country

BROWARD

Zip

33067

Country

BROWARD

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0811668

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NIRENBERG, BRADLEY
10625 N.W. 49TH STREET
CORAL SPRINGS FL 33076**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5017 N.W. 125th Ave

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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

TITLE **D** ☐ Delete
NAME **NIRENBERG, BRAD**
STREET ADDRESS **10625 N.W. 49TH STREET**
CITY-ST-ZIP **CORAL SPRINGS FL 33076**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **5017 N.W. 125th Ave**
CITY-ST-ZIP **CORAL SPRINGS, FL 33076**

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

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NAME
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:

Brad Nirenberg
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-03

Date

(954) 255-6956

Daytime Phone #

CR2E034 (10/02)