

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000016634

1. Entity Name
The New Angelika Corporation

Principal Place of Business Mailing Address
37 North ORANGE AVE
Suite 1050
ORLANDO, FLA. 32801

2. Principal Place of Business 3. Mailing Address
37 North ORANGE Suite
Suite, Apt. #, etc. Suite, Apt. #, etc.
1050

City & State Orlando, FLA City & State

Zip Country Zip Country
32801 ORANGE 32801 ORANGE

4. Name and Address of Current Registered Agent
Hussey, John
37 North ORANGE AVE
Suite 1050
ORLANDO, FLA. 32801

5. 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 *John Hussey* DATE 8/29/01
(NOTE: Registered Agent signature required when reinstating)

6. 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Director, President ☐ Delete
Kahn, Cameron
37 N. ORANGE AVE
ORLANDO, FLA. 32801

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Vice President I ☒ Change ☐ Addition
Hussey, John
37 N. ORANGE AVE
ORLANDO, FLA. 32801

Vice President II ☐ Change ☐ Addition
Wright, Charles
37 N. ORANGE AVE
ORLANDO, FLA. 32801

Vice President III ☐ Change ☐ Addition

Vice President IV ☐ Change ☐ Addition

Vice President V ☐ 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: *John Hussey* DATE 8/29/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
AMENDED
01 NOV 15 PM 5:28

DO NOT WRITE IN THIS SPACE

CR2034 (11/00)