

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000040453

1. Entity Name

AMERI-GLOBE PUBLISHING, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90018 017 ***150.00

Principal Place of Business

2630 W. 81ST STREET
HIALEAH FL 33016-2755

Mailing Address

2500 HOLLYWOOD BLVD.
STE 212
HOLLYWOOD FL 33020-6615

2. Principal Place of Business

3. Mailing Address

2237 N. Commerce Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUITE #3
City & State
Weston, Florida

Zip

Country

Zip 33326

Country US

4. FEI Number

65-0854560

Applied For

Not Applicable

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

MANELLA, ROSS H ESQ
2500 HOLLYWOOD BLVD.
SUITE 212
HOLLYWOOD FL 33020

Name MANELLA, ROSS H. ESQ.

Street Address (P.O. Box Number is Not Acceptable)
2237 N. Commerce Parkway

#3

Suite

City Weston, Florida

FL

Zip Code 33326

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

ROSS MANELLA

4/10/2000

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, 2000 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 DP ☐ Delete
NAME SCHNAVEL, KEVIN
STREET ADDRESS 410-ST NICHOLAS #600
CITY-ST-ZIP MONTREAL QUEBEC CANADA H2Y2P5

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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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: *Kevin Schnavel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin Schnavel

4/10/2000/

Date

954
3853637

Daytime Phone #

CR2E034 (9/99)