## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2000 8:00 am Secretary of State DOCUMENT # **P98000040500** 1. Entity Name AMERICAN NETWORK TRANSPORTATION MANAGEMENT, INC. 04-18-2000 90195 011 \*\*\*150 00 Mailing Address Principal Place of Business 1710 TROPICANA WAY 1710 TROPICANA WAY VALRICO FL 33954-4074 VALRICO FL 33594-4074 2. Principal Place of Business 3. Mailing Address 11100 bloth St N illoo leleth St Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-3506268 Florida .arao Not Applicable Zip3377 \$8.75 Additional 5. Certificate of Status Desired USA Fee Required: 6. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name ANDREWS, JANA ESQ Street Address (P.O. Box Number is Not Acceptable) 2807 W BUSCH BLVD SUITE 202 TAMPA FL 33606 City 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 it applicable.\_\_\_\_\_\_ DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550,00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PTD Change ☐ Addition TITLE Delete TITLE PFUNDT, NORMAN NAME NAME STREET ADDRESS STREET ADDRESS 11100 66TH STREET NORTH STE 22 CITY-ST-7IP CITY-ST-ZIP **LARGO FL 33773** ۷P ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME REYNOLDS, LARRY NAME STREET ADDRESS STREET ADDRESS 11100 66TH STREET NORTH STE 22 CITY-ST-ZIP CITY-ST-ZIE LARGO FL 33773

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

TITLE

TITLE

NAME

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changed, or on an attachment with a address, with all other like empowered.

OLESEN, EILIF

LARGO FL 33773

11100 66TH STREET NORTH STE 22

TITLE

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CR2E034 (9/99)

Addition

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