

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000044372

1. Entity Name

ALL TRANSMISSIONS BY BILLY RAY, INC.

FILED

Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90080 005 ***150.00

Principal Place of Business 431 JUPITER LAKE BLVD. 2133D JUPITER FL 33458	Mailing Address 431 JUPITER LAKE BLVD. 2133D JUPITER FL 33458-7131
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2. Principal Place of Business 140 Jupiter St. Suite, Apt. #, etc.	3. Mailing Address 140 Jupiter St. Suite, Apt. #, etc.
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City & State Jupiter FL.	City & State Jupiter FL.
Zip 33458	Country US



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0838822	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LONG, WILLIAM 431 JUPITER LAKE BLVD. 2133D JUPITER FL 33458	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ (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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, WILLIAM 431 JUPITER LAKE BLVD. 2133D JUPITER FL 33458	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Long, William 140 Jupiter St. Jupiter, FL 33458
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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: William R. Long 4/26/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)