

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000051299

1. Entity Name

GLOBAL ACCESS ENTERTAINMENT, INC.

FILED
Jul 07, 2000 8:00 am
Secretary of State

07-07-2000 90406 022 ***150.00

Principal Place of Business

212 NORTHWEST 4TH AVENUE
 HALLANDALE FL 33009

Mailing Address

212 NORTHWEST 4TH AVENUE
 HALLANDALE FL 33009-4015

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0841397

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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 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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PSTD-
 RUBIN, JOSHUA
 212 NORTHWEST 4TH AVENUE
 HALLANDALE FL 33009

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PSTD
 MICHAEL RUBIN
 212 NW 4TH AVE
 HALLANDALE FL 33009

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12.

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

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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:

Michael Rubin
 MICHAEL RUBIN

April 29 2000 954-5875

Daytime Phone #

CR2E034 (9/99)