

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90005 005 ***150.00

DOCUMENT # P98000052395

1. Entity Name

SALES FORCE & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

2640 HOLLYWOOD BLVD
 #115
 HOLLYWOOD FL 33020

2640 HOLLYWOOD BLVD
 #115
 HOLLYWOOD FL 33020

2. Principal Place of Business

3. Mailing Address

2640 Hollywood Blvd.

2640 Hollywood Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

121

121

City & State

City & State

Hollywood FL

Hollywood FL

Zip

Country

Zip

Country

33020

33020

4. FEI Number

65-0908550

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

**SAMUELS, LEONARD K
 BERGER DAVIS & SINGERMAN
 350 EAST LAS OLAS BLVD STE 1000
 FT LAUDERDALE FL 33301**

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 _____

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D	STOYER, JEFFREY	2640 HOLLYWOOD BLVD HOLLYWOOD FL 33020	<input type="checkbox"/>
	D	MARTINEZ, BOBBI	2640 EAST LAS OLAS BLVD STE 1000 HOLLYWOOD FL 33020	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	<i>SAME</i>	<i>2640 Hollywood Blvd. # 121</i>	<i>Hollywood FL 33020</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: _____

Bobbi Martinez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/01

Date

(954) 927-6074

Daytime Phone #

CR2E034 (10/00)