

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000058437

1. Entity Name

ISLAND COMMUNICATIONS USA, INC.

Principal Place of Business

Mailing Address

340 TANGERINE AVE
MERRITT ISLAND FL 32953

340 TANGERINE AVE
MERRITT ISLAND FL 32953-4770

2. Principal Place of Business

670 N. COURTENAY PKWY
Suite, Apt. #, etc.
19B

3. Mailing Address

670 N. COURTENAY PKWY
Suite, Apt. #, etc.
SUITE 19B

City & State

MERRITT ISLAND, FL

City & State

MERRITT ISLAND, FL

Zip

32953

Country

BREVARD

Zip

32953

Country

BREVARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3531286

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WEST, ROBERT

31 WINAR DRIVE

MERRITT ISLAND FL 32953

address
change →

7. Name and Address of New Registered Agent

Name

WEST, ROBERT

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

670 N. COURTENAY PKWY

#19B

City

MERRITT ISLAND

FL

Zip Code

32953

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 PVPD ☐ Delete
NAME WEST, KIMBERLY
STREET ADDRESS 340 TANGERINE AVE
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PVPD (ADDRESS Change) ☐
NAME WEST, KIMBERLY
STREET ADDRESS 670 N. COURTENAY PKWY #19B
CITY-ST-ZIP MERRITT ISLAND, FL 32953

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

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

TITLE ☐ Change ☐
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CITY-ST-ZIP

TITLE ☐ Change ☐
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 changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

Kimberly West
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-03-00

321-454-2269

Date

Daytime Phone #