

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000104294

1. Entity Name

HOLY COW COMMUNICATIONS, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90080 009 ***150.00

Principal Place of Business

Mailing Address

% MARK D. WALLACE
 1200 BRICKELL AVE., STE. 950
 MIAMI FL 33131

% MARK D. WALLACE
 1200 BRICKELL AVE., STE. 950
 MIAMI FL 33131-3255

2. Principal Place of Business

3. Mailing Address

4910 Blue Lake Drive

4910 Blue Lake Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 140

Suite 140

City & State

City & State

Boca Raton, Florida 33446

Boca Raton, Florida 33446

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

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

WALLACE, MARK
1200 BRICKELL AVE., STE. 950
MIAMI FL 33131

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

D

☐ Delete

NAME

WAGNER, ROGER H

STREET ADDRESS

1200 BRICKELL AVE., STE. 950

CITY-ST-ZIP

MIAMI FL 33131

TITLE

D

☒ Delete

NAME

GUZZETTA, MARK A

STREET ADDRESS

1200 BRICKELL AVE., STE. 950

CITY-ST-ZIP

MIAMI FL 33131

TITLE

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NAME

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STREET ADDRESS

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STREET ADDRESS

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CITY-ST-ZIP

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TITLE

D

☐ Change ☐ Addition

NAME

Wagner, Roger H

STREET ADDRESS

4910 Blue Lake Drive, Suite 140

CITY-ST-ZIP

Boca Raton, FL 33446

TITLE

-

☐ Change ☐ Addition

NAME

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STREET ADDRESS

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CITY-ST-ZIP

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NAME

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STREET ADDRESS

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CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4.28.00 561.999.8906

CR2E034 (9/99)