2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900003091 Jun 22, 2000 8:00 am 1. Entity Name PROPULSION MARKETING ALLIANCE, INC. **Secretary of State** 05-24-2000 90153 020 ***150.00 Principal Place of Business Mailing Address 2264 6TH AVENUE SOUTHEAST 2264 6TH AVENUE SOUTHEAST VERO BEACH FL 33064-7439 VERO BEACH FL 32962 3. Mailing Address 2. Principal Place of Business 3820 *NE* DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Orric SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 nent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this state FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. 66/6) ☐ Change ■ Addition **PSD** TITLE Detete TITLE NAME NAME GARCIA, JAMES STREET ADDRESS STREET ADDRESS 2264 6TH AVENUE SOUTHEAST CITY-ST-ZIP CITY-ST-ZIF VERO BEACH FL 32962 ☐ Addition VTD Delete TITLE Change Change TITLE NAME CORRIE, BRENT R NAME STREET ADORESS STREET ADDRESS 2264 6TH AVENUE SOUTHEAST CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32962 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-7tP CITY-ST-ZIP Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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: