2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021878

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

[redacted]

1. Entity Name
CENTRAL AUDIO VISUAL, INC.

Principal Place of Business
1212 S. ANDREWS AVE.
FT. LAUDERDALE FL 33316

Mailing Address
4750 HEMPSTEAD STATION DR.
DAYTON OH 45429-5164

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0901152 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

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	☐ Delete
D PEPPEL, MICHAEL E 4750 HEMPSTEAD STATION DR. DAYTON OH 45429	☐
D STANLEY, IRA H 4750 HEMPSTEAD STATION DR. DAYTON OH 45429	☐
	☐
	☐
	☐
	☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
200003364342--8 -08/18/00--01054--031 *****61.25 *****61.25	☐ ☐
200003364342--8 -08/18/00--01054--032 *****8.75 *****8.75	☐ ☐
President Michael S. Lever 1212 S. Andrews AVe. Ft Lauderdale Fl 33316	☐ ☒
Vice President Craig M. Balaban 1212 S. Andrews Ave. Ft. Lauderdale Fl 33316	☐ ☒
[redacted]	☐ ☐
KE	☐ ☐

CR2E034 (9/99)

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: _____ 3/10/00 Date 954-522-3796 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 6/27/00