

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90082 047 ***150.00

DOCUMENT # **P99000029211**

1. Entity Name

CLIK.COM, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

110 E. Broward Blvd.

3. Mailing Address

110 E. Broward Blvd.

Suite, Apt. #, etc.

10th Floor

Suite, Apt. #, etc.

10th Floor

City & State

Fort Lauderdale, FL

City & State

Fort Lauderdale, FL

4. FEI Number

65-0914222

Applied For

Not Applicable

Zip

33301

Country

USA

Zip

33301

Country

USA

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Christine P. Yates, C/O Tripp Scott

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

110 SE 6th St., 15th Floor

City

Fort Lauderdale

FL

Zip Code

33301

**DO NOT WRITE
IN THIS SPACE**

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	CEO Michael S. Egan 110 E. Broward Blvd. Fort Lauderdale, FL 33301	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	President & Treasurer Celeste V. Allen 110 E. Broward Blvd. Fort Lauderdale, FL 33301	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary Norman D. Tripp 110 SE 6th St. Fort Lauderdale, FL 33301	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Asst. Treasurer Norberto Garcia 110 E. Broward Blvd. Fort Lauderdale, FL 33301	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Asst. Secretary Robin Segaul 110 E. Broward Blvd. Fort Lauderdale, FL 33301	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE 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)(j), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Asst. Treasurer

04/26/02

Date

954-522-1440

Daytime Phone #