

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2002 8:00 am
Secretary of State

04-18-2002 90389 048 ***150.00

DOCUMENT # P99000031100

1. Entity Name
BASS STATION USA, INC.

Principal Place of Business

**3030 NW 79 ST.
 MIAMI FL 33147**

Mailing Address

**3030 NW 79 ST.
 MIAMI FL 33147**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0906509

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ASHKENAZI, AVI
 2500 N.E. 135 ST. APT. 506
 NORTH MIAMI FL 33181**

7. Name and Address of New Registered Agent

Name

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

2996 Lake Wood Lane

City

Hollywood

FL

Zip Code

33210

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, 2002 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 **DT** ☐ Delete
 NAME **ASHKENAZI, ELY**
 STREET ADDRESS **2500 N.E. 135 ST. APT 506**
 CITY-ST-ZIP **MIAMI FL 33138**

TITLE **DPVS** ☐ Delete
 NAME **ASHKENAZI, AVI**
 STREET ADDRESS **2500 N.E. 135 ST. APT 506**
 CITY-ST-ZIP **MIAMI FL 33138**

TITLE ☐ Delete
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 CITY-ST-ZIP

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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 ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2996 Lake Wood Lane.**
 CITY-ST-ZIP **Hollywood, FL 33210**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **2996 Lake Wood Lane**
 CITY-ST-ZIP **Hollywood, FL 33210**

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 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 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

4-12-02 **1305-8366079**
 Date Daytime Phone #

CR2E034 (9/01)