

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90517 028 ***150.00

DOCUMENT # P99000041223

1. Entity Name
BLUE HORSESHOE MARKETING, INC.



Principal Place of Business
% PARAMOUNT MARKETING
2900 GATEWAY DR.
POMPAÑO BEACH FL 33069

Mailing Address
% PARAMOUNT MARKETING
2900 GATEWAY DR.
POMPAÑO BEACH FL 33069



2. Principal Place of Business

550 FAIRWAY DR.

Suite, Apt. #, etc.
#107

City & State
DEERFIELD BEACH, FL

Zip Country
33441 USA

3. Mailing Address

550 FAIRWAY DR.

Suite, Apt. #, etc.
#107

City & State
DEERFIELD BEACH, FL

Zip Country
33441 USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0923555

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SAMUELS, LEONARD K
BERGER SINGERMAN, P.A.
350 EAST LAS OLAS BLVD., SUITE 1000
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name
PAMELA GELET
Street Address (P.O. Box Number is Not Acceptable)
550 FAIRWAY DR.
#107
City
DEERFIELD BEACH FL Zip Code
33441

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature] PAMELA GELET

4-24-03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GELET, PAMELA
STREET ADDRESS 2900 GATEWAY DRIVE
CITY-ST-ZIP POMPAÑO BEACH FL 33069

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 550 FAIRWAY DR. #107
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] PAMELA GELET 4-24-03 954-429-1712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)