

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90046 032 ***150.00

DOCUMENT # P99000041254

1. Entity Name

A. E. F. ENTERPRISES, INC.

Principal Place of Business

**C/O SAMUEL SPENCER BLUM, ESQ.
2666 TIGERTAIL AVE. SUITE 106
COCONUT GROVE FL 33133**

Mailing Address

**C/O SAMUEL SPENCER BLUM, ESQ.
2666 TIGERTAIL AVE. SUITE 106
COCONUT GROVE FL 33133**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0917756**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BLUM, SAMUEL SPENCER
2666 TIGERTAIL AVE, Suite 106
COCONUT GROVE FL 33133**

Name
Blum, Samuel Spencer
Street Address (P.O. Box Number is Not Acceptable)
2666 Tigertail Avenue, Suite 106
City
Coconut Grove **FL** Zip
33133

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ANDOLINA, JOSEPH A ☐ Delete
11 ANTILLA AVENUE
CORAL GABLES FL 33134

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FUSCO, PAUL ☐ Delete
Y
WINSTEAD CT 06093

TITLE **D**
NAME
STREET ADDRESS
CITY-ST-ZIP
Paul Fusco ☒ Change ☐ Addition
376 East Wakefield Blvd.
Winsted, Connecticut 06098

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EVERITT, HOWARD JR. ☐ Delete
APARTMENT 604 505 NE 30 STREET
MIAMI FL 33137

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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: Joseph Andolina **JOSEPH ANDOLINA**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-01

Date

305 673-5336

Daytime Phone #

CR2E034 (10/00)

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