

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044675

1. Entity Name

MADISON ASHLEY, INC.

**FILED**  
**Jun 13, 2000 8:00 am**  
**Secretary of State**

06-13-2000 90011 003 \*\*\*550.00

Principal Place of Business

5765 Funston Street  
Hollywood, FL 33023

Mailing Address

5765 Funston Street  
Hollywood, FL 33023

2. Principal Place of Business

6550 SW 39 Street  
Suite, Apt. #, etc.

3. Mailing Address

5741 Sheridan Street  
Suite, Apt. #, etc.

0006418C

DO NOT WRITE IN THIS SPACE

City & State

Davie, Florida

City & State

Hollywood, Florida

4. FEI Number

65-0922947

Applied For

Not Applicable

Zip

33314

Country

USA

Zip

33021

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

Kevin I. Schwartz  
2950 SW 27 Ave., #210  
Miami, Florida 33133

## 7. Name and Address of New Registered Agent

Name

Kevin I. Schwartz, Esq.

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

5741 Sheridan Street

City

Hollywood

FL

Zip Code  
33021

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.

Kevin I. Schwartz, Esq.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/6/00

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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Director  
Tammy Swiecki  
5765 Funston Street  
Hollywood, FL 33023

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

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Director/President  
Tammy Swiecki  
6550 SW 39 Street  
Davie, Florida 33314

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Secretary/Treasurer  
John Falzarano  
5765 Funston Street  
Hollywood, Florida 33023

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

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

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

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

Tammy Swiecki, President

Date

Daytime Phone #

954.527-2999

CR2E034 (9/99)