

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90013 014 ***150.00

DOCUMENT # P99000066733

1. Entity Name

MOTION DISPLAY INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

1900 N.W. 32ND. STREET
 POMPANO BEACH FL 33069

1900 N.W. 32ND. STREET
 POMPANO BEACH FL 33069

2. Principal Place of Business *ocean Blvd*

1360 South Ocean Blvd
 Suite, Apt. #, etc. 1805

3. Mailing Address

1360 South OCEAN Blvd
 Suite, Apt. #, etc. 1805

City & State
 POMPANO Beach

City & State
 POMPANO Beach

4. FEI Number 65-0940158

Applied For
 Not Applicable

Zip Country
 33062

Zip Country
 33062 USA

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

DROSKY, TODD C ESQ.
 GILLESPIE & ALLISON, P.A., 1515 SO. FEDERAL
 HWY., STE. 300
 BOCA RATON FL 33432

Name

JACKI JACQUOT

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

1360 South Ocean Blvd Apt 1805

City

POMPANO Beach FL Zip Code 33062

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

07-09-01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 D
 NAME JACQUOT, JACKI
 STREET ADDRESS 1360 Sth Ocean Blvd
 CITY-ST-ZIP POMPANO BEACH FL 33069 62 ☐ Delete

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

TITLE
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 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Change ☐ Addition

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 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:

SIGNATURE OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/09/01

Date

Daytime Phone #

CR2E034 (5/01)

Attachment # P99 0000 66733
C0073737

July 11, 2001

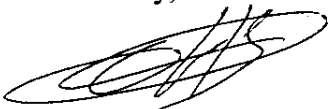
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Please be advised that this is the first notification we received from the Uniform Business Report. We have enclosed a check in the amount of \$150.00 as we wish to maintain this Corporation on active status. Nonetheless, we do not feel penalties apply as we were not previously advised to submit payment.

Should you have any questions or concerns, do not hesitate to contact our offices. Thank you for your attention.

Sincerely,



Jacki Jacquot
President