

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000072204

1. Entity Name

FRICK AND FRACK FISHING, INC.

FILED
Jun 30, 2002 8:00 am
Secretary of State

05-30-2002 91592 029 ***100.00

06-30-2002 90229 040 ****50.00

Principal Place of Business
 3300 N. 29TH AVE., STE. 101
 HOLLYWOOD FL 33020

Mailing Address

3300 N. 29TH AVE., STE. 101
 HOLLYWOOD FL 33020

1407 Harrison St
 HOLLYWOOD, FL 33020

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 65-1039692

Applied For
 Not Applicable

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

JENNINGS, EDWARD J
 200 SE 18TH COURT
 FORT LAUDERDALE FL 33316

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P
 DAVID, JAMES
 3300 N. 29TH AVE., STE. 101
 HOLLYWOOD FL 33020

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

V
 DAVID, FREDERIC
 3300 N. 29TH AVENUE STE 101
 HOLLYWOOD FL 33020

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

SV
 DAVID, BENETT L
 3300 N. 29TH AVENUE STE 101
 HOLLYWOOD FL 33020

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☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02 954-920-2694

Date

Daytime Phone #

CR2E034 (9/01)