

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085676

1. Entity Name

AEM MARKETING COMMUNICATIONS, INC.

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90037 004 \*\*\*750.00

Principal Place of Business

1225 GEORGE BUSH BLVD. #2  
 DELRAY BEACH FL 33483

Mailing Address

1225 GEORGE BUSH BLVD. #2  
 DELRAY BEACH FL 33483

2. Principal Place of Business

539 NE 10th AVE

Suite, Apt. #, etc.

3. Mailing Address

539 NE 10th AVE

Suite, Apt. #, etc.

City & State

FT LAUDERDALE

City & State

FT LAUDERDALE

4. FEI Number

650956136

Applied For

Not Applicable

Zip

33301

Country

USA

Zip

33301

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Joel H. Feldman

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

401 Camino Gardens Blvd.

City

Boca Raton

FL

Zip Code

33432

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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

TITLE D ☐ Delete  
 NAME MITSAKOS, ANDRIA E  
 STREET ADDRESS 1225 GEORGE BUSH BLVD. #2  
 CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME MITSAKOS, ANDRIA E  
 STREET ADDRESS 539 NE 10th AVE  
 CITY-ST-ZIP FT. LAUDERDALE FL 33301

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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 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/15/00

Daytime Phone #

954-535-9888

CR2E034 (5/00)