2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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COVER	SHOW, INC.				Fl	LED		
Principal Place of Business Mailing Address					00 JUN -9 PM 1:00			
CCC SHERIDAN STREET		,	4330 Sheridan Stréet Hollywood Fl 33021-1406		SECRETA	RY OF STA	TE.	
					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
,						REGIS CENTI GENIR INITI		
2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address	3. Mailing Address		DO NOT WRITE IN THIS SPACE 65-0965860 4. FEI Number NO ACTIVITY, NEW C. Applied For Not Applicated to Not Applicate			
		Suite, Apt. #, etc. City & State						
				4				
Zip - · · ·	Country ·	Zip	Country		Certificate of Status Desire	ed ' 🗀 💲	8.75 Add	ditional
	6. Name and Address of Curre	nt Registered Agent	1		Name and Address of Ne	F6	e Require	d
× ======		<u> </u>	Name					
	FATY, CHARLES S D SHERIDAN STREET		Street Address ((P.O. Box Number is Not Acceptable)			
SUN	TE 202-B LYWOOD FL 33021							-
пор			City			FL	Zip Code	е
, IGNATURE	Signature, typed or printed name of registered age	and title if applicable. (NO	TE: Registered Agent sign	nature required when	agent, or both, in the State o	f Florida.		
, IGNATURE This corporate Tax filling (See crite)	Signature, typed or printed name of registered age oration is eligible to satisfy its Intangik requirement and elects to do so, ria on back)	ont and title if applicable. (NO PILE NOW After MAY 1, 2 Make Check Paya	TE: Registered Agent sign /III FEE IS \$150 000 Fee will be ble to Departme	sture required wher \$550.00 \$550.00	10. Election Campaigr Trust Fund Contrib	DATE n Financing ution.	Ådded	0 May Be to Fees
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