

2002 UNIFORM BUSINESS REPORT (UBR)

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

01-30-2002 90146 034 ***150.00

DOCUMENT # P99000093482

1. Entity Name
STUDIO REMONTANT, INC.

Principal Place of Business

1027 NE 36TH ST.

FT. LAUDERDALE FL 33064

Mailing Address

1027 NE 36TH ST.

FT. LAUDERDALE FL 33064

INCORRECT ZIP CODE ABOVE

2. Principal Place of Business

1027 NE 36TH ST

Suite, Apt. #, etc.

FT LAUDERDALE

City & State

FL

Zip
 33334-2862

Country

3. Mailing Address

Suite, Apt. #, etc.

1027 NE 36TH ST

City & State

FT LAUDERDALE FL

Zip
 33334-2862

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0962816**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Thomas G. Pye, Esquire
23 NW 33rd Court, Suite 5
Gainesville, FL 32607

7. Name and Address of New Registered Agent

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

TITLE **P** ☐ Delete
 NAME **TACKETT, KENNETH A**
 STREET ADDRESS **1027 NE 36TH ST.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33064-33334**

TITLE ☐ Delete
 NAME
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

KENNETH A. TACKETT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/02

Date

954-563-9094

Daytime Phone #

CR2E034 (9/01)