

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 15, 2001 08:00 AM****Secretary of State****DOCUMENT # P99000099476**1. Entity Name
SMITH & ROBB ADVERTISING CORP.Principal Place of Business
429 SEABREEZE BLVD, #219
FT LAUDERDALE FL 33316
Mailing Address
429 SEABREEZE BLVD, #219
FT LAUDERDALE FL 333162. Principal Place of Business
1314 EAST LAS OLAS BLVD
3. Mailing Address
1314 EAST LAS OLAS BLVDSuite, Apt. #, etc.
PMB # 1100
Suite, Apt. #, etc.
PMB # 1100City & State
FT LAUDERDALE FL
City & State
FT LAUDERDALE FLZip
33309
Country
Zip
33309
Country4. FEI Number
65-0962243
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**SMITH ANDREW**
1251 GRANT STREET**HOLLYWOOD FL**
33019 US**7. Name and Address of New Registered Agent**Name
SMITH ANDREWStreet Address (P.O. Box Number is Not Acceptable)
5943 NW 66TH AVECity
PARKLAND FL
Zip Code
33067

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 _____ **01/15/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
ROBB CHARLES
429 SEABREEZE BLVD, #219
FT LAUDERDALE FL 33316 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
SMITH ANDREW D
429 SEABREEZE BLVD, #219
FT LAUDERDALE FL 33316 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
ROBB CHARLES
1314 EAST LAS OLAS BLVD, PMB 1100
FT LAUDERDALE FL 33301 ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
SMITH ANDREW D
1314 EAST LAS OLAS BLVD PMB 1100
FT LAUDERDALE FL 33301 ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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: Andrew Smith

PTD 01/15/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)