

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91500 039 ***150.00

DOCUMENT # S04351

1. Entity Name
AAA TV & ANTENNA SERVICE, INC.



Principal Place of Business
**1738 N MILITARY TRAIL
W PALM BEACH FL 33409
US**

Mailing Address
**1738 N MILITARY TRAIL
W PALM BEACH FL 33409
US**



2. Principal Place of Business
120 WATERWAY AVE
Suite, Apt. #, etc.

3. Mailing Address
120 WATERWAY AVE
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
SATSUMA, FLA
Zip
32189
Country
USA

City & State
SATSUMA, FLA
Zip
32189
Country
USA

4. FEI Number
65-0226655

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MANSFIELD, RONNIE
1738 N MILITARY TRAIL
W PALM BEACH FL 33409**

7. Name and Address of New Registered Agent

Name
BRENDA MANSFIELD
Street Address (P.O. Box Number is Not Acceptable)
120 WATERWAY AVE
City
SATSUMA FL Zip Code
32189

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Bla Mansfield**
Signature, typed or printed name of registered agent applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-25-03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANSFIELD, RONNIE 1738 N MILITARY TRAIL WEST PALM BEACH FL 33409	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRENDA MANSFIELD 120 WATERWAY AVE SATSUMA, FLA 32189	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **RONNIE MANSFIELD** REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/03 306-312-0678
Date Daytime Phone #

CR2E034 (10/02)