2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S41341 DOCUMENT

1. Entity Name

YMS MEDIA SERVICES, INC.



#1LED Mar 20, 2003 8:00 am Secretary of State

03-20-2003 90101 016 ***150.00

Mailing Address Principal Place of Business 9780 VANDERBILT DR 9780 VANDERBILT DR NAPLES FL 34108 NAPLES FL 34108 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State 65-0248372 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name YOUNG, ROBERT F Street Address (P.O. Box Number is Not Acceptable) 9780 VANDERBILT DR NAPLES FL 34108 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 **\$5.00** May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ☐ Change CD/01/ 12/03/02 ☐ Addition TITLE ☐ Delete TITLE NAME YOUNG, ROBERT F NAME STREET ADDRESS 9780 VANDERBILT DR STREET ADDRESS CITY-ST-ZIP NAPLES FL 34108 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ے نے ا TITLE Delete -TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Defete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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.

ROBERTE YOUNG 4-20-03