FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name S93924

(6)

URM	TAKE	TWO,	INC.		

Principal Place of Business Mailing Address

Country

6822 22ND AVE N ST PETERSBURG FL 33710

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Zip

10.1 **经**基金 12.4 cm

6822 22ND AVE N ST PETERSBURG FL 33710

2a. Mailing Address

City & State

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27

28

Suite, Apt #, etc.

FILED

Feb 09 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

11/13/1991

59-3090572

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

24	25	29	30		l	Personal Property Tax due June 3	30. 🔀 Ye	s [
	p. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Reg	istered Agen	ŧ					
ALONSO, JORGE F. 9714 121ST ST N SEMINOLE FL 34642					Name							
					Street Address	(P.O. Box Number is Not Acceptable	e)					
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			ļ°	' °	City		FL 85	Zip	Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Begistered Agent signature required when rehistang) DATE												
12,		AND DIRECTORS	13.	Mant	reignatus redordo v	ADDITIONS/CHANGES TO OFFICE		COTO				
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TITLE	VSD	☐ DELÉTE	2.1 TITU		- 214			hange	Addition			
NAME	HURM, ROBERT		2.2 NAM		ĺ							
STREET ADDRESS	723 61ST AVE S		2.3 STRE		DUBERS							
CITY-ST-ZIP	ST PETERSBURG FL		2. 4 CITY	-	· · ·				<u> </u>			
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CITY-ST-ZIP			5.4 CITY	· ST - Z	ZIP							
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NAME			62 NAM	IE.					ŀ			
STREET ADDRESS			6.3 STRE	EET AD	DDRESS				ļ			
CITY-ST-ZIP			6.4 CITY	- 51 - 2	ZIP							
14. Thereby 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 annual report or supplemental annual 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 correver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: CAROLW HURM 2/1/98 (13)381-2011												
SIGNAT	UHE: WWW.	. PW4~ :	CHK()	LУ	ツ カイバ	UN 941140	1 112 ド	וס כ	Ø011			

Country