

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90007 007 ***150.00

DOCUMENT # V11264

1. Entity Name
AMERICAN MARKETING CONCEPTS INC.

Principal Place of Business Mailing Address
3817 MACFARLANE ST. 3817 MACFARLANE ST.
MELBOURNE BCH., FL 32951 MELBOURNE BCH., FL 32951
~~OLD ADDRESS~~
5100 DUPONT BLVD #6G NEW ADDRESS
FT. LAUDERDALE, FL 33309

2. Principal Place of Business 3. Mailing Address
5100 DUPONT BLVD 5100 DUPONT BLVD
Suite, Apt. #, etc. Suite, Apt. #, etc.
6G 6G

City & State City & State
FT. LAUDERDALE, FL FT. LAUDERDALE, FL
Zip Country Zip Country
33308 USA 33308 USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0343351 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ELIAS, TED
3817 MACFARLANE ST.
MELBOURNE BCH., FL 32951

Name ELIAS TED
Street Address (P.O. Box Number is Not Acceptable)
5100 DUPONT BLVD
6-G
City FT. LAUDERDALE FL Zip Code 33308

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 *Ted Elias*

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME ELIAS, TED
STREET ADDRESS 3817 MACFARLANE ST. 5100 DUPONT BLVD.
CITY-ST-ZIP MELBOURNE BCH., FL 32951 FT. LAUDERDALE, FL

TITLE
NAME 33308
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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: *Ted Elias*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/01 954 4935055

Date Daytime Phone #

CR2E034 (10/00)