

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V29650

1. Entity Name

EAST COAST ADVERTISING, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90050 027 ***150.00

Principal Place of Business

Mailing Address

5252 SUNSET DRIVE
MIAMI FL 33143

5252 SUNSET DRIVE
MIAMI FL 33233-0097

00000004

2. Principal Place of Business

3. Mailing Address

1010 NW 11 Street

PO Box 330097

Suite, Apt. #, etc.

603

Suite, Apt. #, etc.

City & State
Miami FL

City & State
Miami FL

Zip
33136

Country
USA

Zip
33233

Country
USA

4. FEI Number

65-0345266

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

HANCOCK, EUGENE A
5252 SUNSET DRIVE
MIAMI FL 33143

Name

Street Address (P.O. Box Number is Not Acceptable)

1010 NW 11 St.
#603

City

Miami

FL

Zip Code
33136

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

Eugene A. Hancock

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, 2000 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
HANCOCK, EUGENE A SR
5252 SUNSET DR.
MIAMI FL 33143

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1010 NW 11 St. #603
Miami FL 33136

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HANCOCK, EUGENE A JR
5252 SUNSET DR.
MIAMI FL 33143

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1010 NW 11 St. #603
Miami FL 33136

☒ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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☐ Delete

TITLE
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 an other like empowered.

SIGNATURE:

Eugene A. Hancock

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)