

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State

03-09-2001 90501 010 ***150.00

DOCUMENT # V52701

1. Entity Name

ART HEADQUARTERS, INC.

Principal Place of Business

11885 44TH ST. NO.
 CLEARWATER FL 34622
 US

Mailing Address

11885 44TH ST. NO.
 CLEARWATER FL 34622
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3132444**

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

~~SUPAK, JON~~
 11885 44TH ST. NO.
 CLEARWATER FL 34622

Name

DAVID REGAN

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

11885 44TH ST NORTH

City

Clearwater

FL

Zip Code

33762

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

David Regan

DAVID REGAN

2/28/01

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 **VS** ☒ Delete
 NAME **REGAN, DAVID**
 STREET ADDRESS **1175 JACKSON DR**
 CITY-ST-ZIP **CLEARWATER FL 33755**

TITLE **PT** ☒ Change ☐ Addition
 NAME **DAVID REGAN**
 STREET ADDRESS **1175 JACKSON RD**
 CITY-ST-ZIP **Clearwater FL 33762**

TITLE **PT** ☒ Delete
 NAME **SUPAK, JON**
 STREET ADDRESS **1735 SUNSET DR**
 CITY-ST-ZIP **CLEARWATER FL 33755**

TITLE **VS** ☒ Change ☐ Addition
 NAME **ELIZABETH REGAN**
 STREET ADDRESS **1175 JACKSON RD**
 CITY-ST-ZIP **Clearwater FL 33762**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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:

David Regan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/06/2001

Date

Daytime Phone #

CR2E034 (10/00)

0368924