

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 398292

1. Entity Name

MANOR BUILDINGS, INC

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90083 014 \*\*\*150.00

Principal Place of Business

Mailing Address

34496 CORTEZ BLVD.  
RIDGE MANOR FL 33523  
US

34496 CORTEZ BLVD  
RIDGE MANOR FL 33523-8908  
US

A0005987



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number 59-1421595

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TRAUB, FRED  
5952 COUNTRY CLUB DRIVE  
RIDGE MANOR FL 33523

Name

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

City

FL

Zip Code

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

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	P	<input type="checkbox"/> Delete
NAME	TRAUB, FRED	
STREET ADDRESS	5952 COUNTRY CLUB DRIVE	
CITY-ST-ZIP	RIDGE MANOR FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	TRAUB, BEVERLY	
STREET ADDRESS	5952 COUNTRY CLUB DRIVE	
CITY-ST-ZIP	RIDGE MANOR, FL 00000	
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CITY-ST-ZIP		

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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Fred Traub*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-10-00

Daytime Phone #

352-583-3284

CR2E034 (9/99)