

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90059 044 ****61.25

DOCUMENT # 714057

1. Entity Name
HOLLYWOOD STAMP CLUB, INC.



Principal Place of Business
**1720 N.E. 79 ST. CAUSEWAY
SUITE #111
NORTH BAY VILLAGE FL 33141-4222**

Mailing Address
**1720 N.E. 79 ST. CAUSEWAY
SUITE #111
NORTH BAY VILLAGE FL 33141-4222**

2. Principal Place of Business

3. Mailing Address

6864 NW 26 TERRACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Fort Lauderdale Fla

Zip

Country

Zip

Country

33309

Broward

4. FEI Number **23-7128686**

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

**SOLOMON, NORMAN F
1720 N.E. 79 ST. CAUSEWAY
SUITE #111
NORTH BAY VILLAGE FL 33141-4222**

Name **Karl Shallenberger**
Street Address (P.O. Box Number is Not Acceptable)
6864 NW 26 TERRACE
Ft. Lauderdale
City **FL** Zip Code **33309**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/20/03
DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	KLEINMAN, LOUIS	
STREET ADDRESS	300 S.W. 134 WAY, APT. #E-20	
CITY-ST-ZIP	PEMBROKE PINES FL 33027	
TITLE	DV	☒ Delete
NAME	BENNETT, ROBERT	
STREET ADDRESS	3140 OCEAN DRIVE	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	T	☒ Delete
NAME	SOLOMON, NORMAN F	
STREET ADDRESS	1720 N.E. 79 ST. CAUSEWAY, SUITE 111	
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141-4222	
TITLE	R	☐ Delete
NAME	ROBBINS, S. HARRIS	
STREET ADDRESS	120 HAMMOCKS CTS.	
CITY-ST-ZIP	WEST PALM BEACH FL 33413	
TITLE	FS	☐ Delete
NAME	GUSS, MAYNARD	
STREET ADDRESS	9593 N.W. 26 PLACE	
CITY-ST-ZIP	SUNRISE FL 33322-2738	
TITLE	COBD	☐ Delete
NAME	SHALLENBERGER, KARL	
STREET ADDRESS	6864 N.W. 26 TERRACE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	

TITLE	T	☒ Change ☐ Addition
NAME	SAMR	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DV	☒ Change ☐ Addition
NAME	Kachel, Stewart	
STREET ADDRESS	314 Markham	
CITY-ST-ZIP	Deerfield Beach 33442	
TITLE	PD	☒ Change ☐ Addition
NAME	HARRY Mabree	
STREET ADDRESS	1599 NE 110 St.	
CITY-ST-ZIP	Miami 33161	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/20/03

954-818-7843

CR2E037 (10/02)