

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90049 040 ****61.25

DOCUMENT # 718672

1. Entity Name

TEMPLE SOLEL, INC.

Principal Place of Business

Mailing Address

**5100 SHERIDAN STREET
HOLLYWOOD FL 33021**

**5100 SHERIDAN STREET
HOLLYWOOD FL 33021**

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

23-7079611

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

**WILSON, BARRY
4601 SHERIDIAN STREET #208
HOLLYWOOD FL 33021**

Name

Wilson, Barry

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **SCHWARTZ, RICHARD**
STREET ADDRESS **76 IVY ROAD**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

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

TITLE **TD** ☐ Delete
NAME **SCHAIN, RONALD**
STREET ADDRESS **10125 N LAKE DR**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **VD** ☒ Change ☐ Addition
NAME **Ronald Schain**
STREET ADDRESS **6145 NW 123rd Lane**
CITY-ST-ZIP **Coral Springs, FL 33076**

TITLE **VD** ☐ Delete
NAME **ORENSTEIN, MICHAEL**
STREET ADDRESS **3420 N. HILLS DRIVE**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

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

TITLE **VD** ☐ Delete
NAME **EDISON, MARGARET**
STREET ADDRESS **5741 S.W. 37 TERR.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

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

TITLE **VD** ☒ Delete
NAME **STOLBERG, VICTOR**
STREET ADDRESS **3201 N 38TH STREET**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

TITLE **TD** ☐ Change ☒ Addition
NAME **Robert Zelko**
STREET ADDRESS **1021 S. Park Rd. #107**
CITY-ST-ZIP **Hollywood, FL 33021**

TITLE ☐ Delete
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:

Ronald Schain

1/2/02

954 989 0005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)