## 2000 UNIFORM BUSINESS REPORT (UBR)

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## DOCUMENT # **F94000000220** Feb 19, 2000 8:00 am 1. Entity Name **Secretary of State** MILESTONE ASSET MANAGEMENT, INC. 02-19-2000 90028 041 \*\*\*150.00 Mailing Address Principal Place of Business 150 E PALMETTO PARK RD 150 E PALMETTO PARK RD 4TH FLOOR 4TH FL BOCA RATON FL 33432 BOCA RATON FL 33432-4827 US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number City & State 52-1843631 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change S ☐ Addition TITLE TITLE ☐ Delete SHORE, HARVEY NAME NAME 150 East Palmetto Park Rd. - 4th Floor STREET ADDRESS STREET ADDRESS 5200 TOWN CENTER CIR. CITY-ST-ZIP Boca Raton, FL 33432 CITY-ST-7IP **BOCA RATON FL 33486** ☐ Delete TITLE MANDOR, ROBERT NAME 150 East Palmetto Park Rd .- 4th FL STREET ADDRESS STREET ADDRESS 5200 TOWN CENTER CIR. CITY-ST-ZIP CITY-\$T-ZIP Boca Raton, FL 33432 **BOCA RATON FL 33486** ☐ Delete TITLE MCMAHON, GREG NAME STREET ADDRESS 150 East Palmetto Park Rd. - 4th FL NAME 5200 TOWN CENTER CIR. STREET ADDRESS Boca Raton, FL 33432 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33486** ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS 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