FILED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9700003659 1. Entity Name CURZON DEVELOPMENT CORP.						Feb 15, 2001 8:00 am Secretary of State 02-15-2001 90089 047 ***150.00			
	ce of Business DRGETOWN RD D 20814	Mailing Address 8000 OLD GEORGETOWN RD BETHESDA MD 20814 US				: (851188 1118 1811/ 1881) 98/1/ 88/1/ 88/1	7 44 171 44 184 1316 3 1881 4	1111 2 12 11 1 22 1	
2. Principal P	Place of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State			4	52-1629466	⊢	pplied For ot Applicable	
Zip	Country	Zip	Cour	ntry	5.	. Certificate of Status Desired	S8.75 Ad Fee Require		
	6. Name and Address of Currer	nt Registered Agent			7.	. Name and Address of New Regis	stered Agent		
DIPASQUALE, TARA A				Name	ليوما المهدان الموادات الميمانية المعادلة المردا المعاد				
11309 KNOT WAY				Street A	eet Address (P.O. Box Number is Not Acceptable)				
COC	OPER CITY FL 33026				45 Sur	Sunset Lane			
				City Ft.	Laude	iderdale FL Zip Code 333330			
Tax filing r	Signature, typed or printed name of registered age pration is eligible to satisfy its Intangib requirement and elects to do so. ria on back)	FILE NOW After MAY 1, 20	!!! FEE 001 Fee	iS \$150. will be \$5	550.00	n reinstating) 10. Election Campaign Financi Trust Fund Contribution.	· _ ••••	May Be	
11.	OFFICERS AN	D DIRECTORS	12.		F	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTOR	S IN 11	
TITLE Name Street address City-St-Zip	P PLOTNEK, HAROLD 2-WISCONSIN-CIRCLE #700 CHEVY CHASE MD 20815	Delete		E ET ADDRESS		D <u>ld</u> Georgetown R sda, MD~20814	[☒ Change d.	Addition	
TITLE Name Street address City-St-Zip	VST KAUFMAN, JAY 2 WISCONSIN CIRCLE #700 CHEVY CHASE MD 2081 5	Delete		E		Old Georgetown R esda, MD 20814	X Change	☐ Addition	
TITLE Name Street address [†] City-st-zip	V PLOTNEK, DAVID 2 Wisconsin Gircle #70 0 G HEVY CHASE MD 20815	□ Delete		E		Old Georgetown R esda, MD 20814	X Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	☐ Addition .	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete					☐ Change	Addition	
ITTLE HAME STREET ADDRESS CITY-ST-ZIP **		☐ Delete					☐ Change	Addition	
indicated of the corp	ertify that the information supplied wi on this report or supplemental report coration or the receiver or trustee emp or on an attachment with an address.	is true and accurate and that mo powered to execute this report	ny signat as requir	ure shall ba	ave the same	e legal effect as if made under oath:	that I am an officer.	or director 1	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: