

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G57912**

1. Entity Name

ABEONA CORPORATION

Principal Place of Business

**814 SEABREEZE DR.
RUSKIN FL 33570**

Mailing Address

**814 SEABREEZE DR.
RUSKIN FL 33570**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

**DYAL, LUCIUS M., JR.
501 EAST KENNEDY BLVD., SUITE 1400
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

City

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 re-registering.)

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 \$180.00
After MAY 1, 2001 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

TITLE **D** ☐ Delete
NAME **KAISER, THERESA K.**
STREET ADDRESS **119 MORNING GLORY CIRCLE**
CITY-STATE-ZIP **WINTER HAVEN FL 33884**

TITLE **D** ☐ Delete
NAME **KESTNER, HARRY, F., JR.**
STREET ADDRESS **6488 N.W. 20TH ST.**
CITY-STATE-ZIP **MARGATE, FL**

TITLE **D** ☐ Delete
NAME **MCNEAL, NANCY K.**
STREET ADDRESS **1970 N.E. 55TH ST.**
CITY-STATE-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ Delete
NAME **KESTNER, MARY M.**
STREET ADDRESS **2500 NE 48TH LN #801**
CITY-STATE-ZIP **FT. LAUDERDALE FL 33308**

TITLE **PD** ☐ Delete
NAME **KESTNER, EDWARD J**
STREET ADDRESS **814 SEABREEZE DRIVE**
CITY-STATE-ZIP **RUSKIN, FL 00000**

TITLE **S** ☐ Delete
NAME **KAISER, THERESA K**
STREET ADDRESS **119 MORNING GLORY CIRCLE**
CITY-STATE-ZIP **WINTER HAVEN FL 33884**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-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 I am empowered.

SIGNATURE

Edward J. Kestner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward J. Kestner

4/18/01 (813)645-2457

Date

Signature Phone

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90138 035 ***150.00

749766



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-5337863**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

CR2E034 (10/00)