**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nar BAKAL,		* - 10		Apr 28, 20 Secretar 04-28-2001 900			
STE 5		Mailing Address 4503 N.W. 103 AVE STE 5 SUNRISE FL 33351			,	11 <b>2 1 2</b> (1 1 1 2 2 )	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.  City & State		Suite, Apt. #, etc.  City & State		DO NOT WRITE IN THIS SPACE  4. FEI Number 59-2422134 Applied For			
Zip	Country	Zip	Country	5. Certificate of Status Desired	□ \$8.75 Add		
	6. Name and Address of Current Re	distered Agent		7. Name and Address of New Reg	Fee Require	<u> </u>	
		<u> </u>	Name				
BAKAL, AUDREY 4503 N.W. 103 AVE STE 5			Street Addres	treet Address (P.O. Box Number is Not Acceptable)			
SUNRISE FL 33351			City		FL Zip Code	e	
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 \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State		0 10, Election Campaign Financ	~ +0.0	<b>0</b> May Be	
11.	OFFICERS AND DI	RECTORS	12.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Bakal, Harold 4503 N.W. 103 AVE. Sunrise FL 33351	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	reconstruction of the same of	Delete	NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Chánge	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
TITLE NAME Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
indicated of the cor	certify that the information supplied with thi on this report or supplemental report is tru poration or the receiver or trustee empowe or on an attachment with an address, with	e and accurate and that my red to execute this report as	signature shall have th	e same legal effect as if made under gath	r that I am an officer i	or director	