

2001  
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18534

1. Entity Name

S.F. INDUSTRIAL SITES PROPERTY OWNERS ASSOCIATIO

Principal Place of Business

4180 NW 132 ST.  
MIAMI FL 33054

Mailing Address

4180 N.W. 132ND STREET  
MIAMI FL 33054-4511  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2850 C STIRLING RD

HOLLYWOOD, FL

33020

BRONX

4. FEI Number

59-2826151

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZOROVICH, FRED  
4180 NW 132 ST.  
MIAMI FL 33054

7. Name and Address of New Registered Agent

Name

FRED A. ZOROVICH

Street Address (P.O. Box Number is Not Acceptable)

2850 C STIRLING ROAD

City

HOLLYWOOD, FL

FL

Zip Code

33020

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

TITLE: SD  
NAME: RAFFA, STEVE  
STREET ADDRESS: 4155 NW 135 ST.  
CITY-ST-ZIP: OPALOCKA FL

TITLE: PD  
NAME: ZOROVICH, FRED  
STREET ADDRESS: 4180 N.W. 132ND ST.  
CITY-ST-ZIP: MIAMI FL

TITLE: VD  
NAME: WARREN, STANLEY  
STREET ADDRESS: 4180 NW 132 ST.  
CITY-ST-ZIP: MIAMI FL

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE:   
NAME:   
STREET ADDRESS: 2850 C STIRLING ROAD  
CITY-ST-ZIP: HOLLYWOOD, FL 33020  
☒ Change ☐ Addition

TITLE:   
NAME:   
STREET ADDRESS: 2850 C STIRLING ROAD  
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☐ Change ☐ Addition

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 03, 2001 8:00 am  
Secretary of State

05-03-2001 90931 026 \*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE

4-25-01  
1-18-2000 345-685-0361