

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90009 039 ***150.00

CR2E034 (9/01)

DOCUMENT # P98000101101

1. Entity Name
GABLES CRESCENT CORP.

Principal Place of Business Mailing Address
ONE BAYFRONT PLAZA **ONE BAYFRONT PLAZA**
100 S BISCAYNE BLVD., SUITE 1100 **100 S BISCAYNE BLVD., SUITE 1100**
MIAMI FL 33131 **MIAMI FL 33131**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DUIUJG16



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0882417** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

~~6. Name and Address of Current Registered Agent~~ ~~7. Name and Address of New Registered Agent~~

HOLLO, JEROME
100 S. BISCAYNE BLVD. #1100
MIAMI FL 33131

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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 _____ (NOTE: Registered Agent signature required when reinstating) 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 \$150.00
After May 1, 2002 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D <input type="checkbox"/> Delete	HOLLO, TIBOR 100 S BISCAYNE BLVD., STE. 1100 MIAMI FL 33131	TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Wayne Hollo 100 S. Biscayne Blvd., 1100 Miami, FL 33131
TITLE P <input type="checkbox"/> Delete	HOLLO, TIBOR 100 S BISCAYNE BLVD STE 1100 MIAMI FL 33131	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S <input type="checkbox"/> Delete	BEAUCHAMP, JAMES 100 S BISCAYNE BLVD STE 1100 MIAMI FL 33131	TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <input type="checkbox"/> Delete		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 like empowered.

SIGNATURE: *Wayne R. Hollo* **Wayne R. Hollo** 4/17/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #