## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Jan 30, 2001 8:00 am DOCUMENT # P98000106517 **Secretary of State** 1. Entity Name COMMERCIAL INVESTMENT REALTY GROUP, INC. 01-30-2001 90109 048 \*\*\*150.00 Principal Place of Business Mailing Address 7967 SE RIVEREDGE STREET 7967 SE RIVEREDGE STREET JUPITER FL 33458 JUPITER FL 33458 611653 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0887139 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent O'SULLIVAN, MAUREEN Street Address (P.O. Box Number is Not Acceptable) 7967 SE RIVEREDGE STREET JUPITER FL 33458 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (10/00) ☐ Addition ☐ Delete TITLE ☐ Change TITLE O'SULLIVAN, MAUREEN NAME NAME STREET ADDRESS 7967 SE RIVEREDGE STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JUPITER FL 33458 ☐ Defete ☐ Change ☐ Addition TITLE TITLE O'SULLIVAN, KEVIN NAME NAME STREET ADDRESS 7967 SE RIVEREDGE STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP JUPITER FL 33458 ☐ Addition TITLE □ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-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 like empowered.