

Amended \$ 61.25
2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PP9000028235
1. Entity Name
GREENHOLD GROUP, INC.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 Dec 28 PM 3:35

Principal Place of Business
120 No. U.S. Hwy. One
Suite 100
Tequesta, FL 33469 OLD

Mailing Address
SAME

2. Principal Place of Business NEW!
1995 E. Oakland Pk. Blvd.
 Suite, Apt. #, etc.
Ste. 350

3. Mailing Address
SAME
 Suite, Apt. #, etc.

City & State
Fort Lauderdale, FL

4. FEI Number
65-0910697

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Vicki J. Lavache
120 No. U.S. Highway One
Suite 100
Tequesta, FL 33469

7. Name and Address of New Registered Agent
 Name John D. Harris
 Street Address (P.O. Box Number is Not Acceptable)
1995 E. Oakland Park Boulevard
Suite 350
 City Fort Lauderdale FL Zip Code 33306

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] DATE Dec 27/00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. **FILE NOW!!! FEE IS \$160.00**
~~After MAY 1, 2000 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 <u>President and Secretary</u>	<input checked="" type="checkbox"/> Delete
NAME <u>Vicki J. Lavache</u>	
STREET ADDRESS <u>120 No. U.S. Hwy. One, Ste. 100</u>	
CITY-ST-ZIP <u>Tequesta, FL 33469</u>	
TITLE <u>Director</u>	<input checked="" type="checkbox"/> Delete
NAME <u>John Keefe, Sr.</u>	
STREET ADDRESS <u>120 No. U.S. Hwy. One, Ste. 100</u>	
CITY-ST-ZIP <u>Tequesta, FL 33469</u>	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE <u>Registered Agent/President/Secretary/Director</u>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <u>John D. Harris</u>	
STREET ADDRESS <u>1995 E. Oakland Park Blvd., Ste. 350</u>	
CITY-ST-ZIP <u>Ft. Lauderdale, FL 33306</u>	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: [Signature] DATE: Dec 27/00 DAYTIME PHONE #: 954-564-0006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CP 27034 (09/00)