

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2001 8:00 am**  
**Secretary of State**

04-18-2001 90103 002 \*\*\*158.75

**A0051550**

DO NOT WRITE IN THIS SPACE

**DOCUMENT # P99000079056**

1. Entity Name  
**PHG Holdings, Inc.** ✓

Principal Place of Business  
**2665 So Biscayne Dr.  
 Ste. 202  
 Coconut Grove, FL 33133**

Mailing Address  
**2665 So Biscayne Dr.  
 Ste. 202  
 Coconut Grove, FL 33133**

2. Principal Place of Business  
**9400 So Dadeland Blvd.  
 Suite, Apt. #, etc. Ste 100  
 City & State Miami FL  
 Zip 33156 Country**

3. Mailing Address  
**9400 So Dadeland Blvd.  
 Suite, Apt. #, etc. Ste 100  
 City & State Miami FL  
 Zip 33156 Country**

4. FEI Number **65-0948918** Applied For  Not Applicable

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

6. Name and Address of Current Registered Agent  
**Wohl, Michael D  
 2665 So Biscayne Blvd. Ste 202  
 Coconut Grove, FL 33133**

7. Name and Address of New Registered Agent  
 Name **Wohl, Michael D**  
 Street Address (P.O. Box Number is Not Acceptable) **9400 So Dadeland Blvd. Ste 100**  
 City **Miami** **FL** Zip Code **33156**

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  **Michael D. Wohl, President** 4/18/01  
Signature, typed or printed name of registered agent and title if applicable. (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.

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P Wohl, Michael D 9400 S. Dadeland Blvd #100 Miami, FL 33156</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>EVP Datch, David 9400 S. Dadeland Blvd #100 Miami, FL 33156</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVP Friedman, Mitchell M 9400 S. Dadeland Blvd #100 Miami, FL 33156</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P Wohl, Michael D 9400 S. Dadeland Blvd #100 Miami, FL 33156</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>C Wolfson, Louis III 9400 S. Dadeland Blvd #100 Miami, FL 33156</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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:  **4/18/01 (305)854-7100**  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/00)