

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90005 038 ***150.00

DOCUMENT # V19166

1. Entity Name
TREMONT REALTY, INC.

Principal Place of Business

Mailing Address

2300 SAMPLE ROAD
 POMPANO BEACH FL 33073

612 UNION AVENUE
 ELIZABETH NJ 07208-2120
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0319056**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIMPAO, PLINIO J.
2300 W. SAMPLE ROAD
SUITE 200
POMPANO BEACH FL 33078

Name **RONALD PIMPAO**
 Street Address (P.O. Box Number is Not Acceptable)
2300 W. SAMPLE ROAD, SUITE 200
 City **POMPANO BEACH** FL Zip Code **33078**

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 *Ronald Pimpao*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/2000

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	PIMPAO, PLINIO J.	
STREET ADDRESS	612 UNION AVE.	
CITY-ST-ZIP	ELIZABETH NJ 07208	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIMPAO, EDMUND	
STREET ADDRESS	612 UNION AVE	
CITY-ST-ZIP	ELIZABETH NJ 07208	
TITLE	D	<input type="checkbox"/> Delete
NAME	PIMPAO, RONALD	
STREET ADDRESS	1270 CLINTON PL, APT 201	
CITY-ST-ZIP	ELIZABETH NJ 07208	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE: *Ronald Pimpao* **REQUIRED**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/2000

Date

908 965-1343

Daytime Phone #

CR2E034 (9/99)