

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90168 030 ***150.00

DOCUMENT # V52766

1. Entity Name
BOCA ADMIN, INC.

Principal Place of Business

19146 LYONS ROAD
 BOCA RATON FL 33434
 US

Mailing Address

19146 LYONS ROAD
 BOCA RATON FL 33434
 US

00046821



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0346295**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

JAIVEN, JACK Changed in 1999!!
 19146 LYONS ROAD
 BOCA RATON FL 33434

Name **Mary Jane Merola**
 Street Address (P.O. Box Number is Not Acceptable)
100 Century Blvd.
 City **West Palm Beach** **FL** Zip Code **33417**

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 *Mary Jane Merola* **MARY JANE MEROLA** **2-21-01**
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. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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
NAME	LEVY, H. IRWIN
STREET ADDRESS	100 CENTURY BLVD.
CITY-ST-ZIP	W. PALM BEACH FL
TITLE	DP <input type="checkbox"/> Delete
NAME	LEVY, MARK F
STREET ADDRESS	100 CENTURY BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33417
TITLE	DVTS <input type="checkbox"/> Delete
NAME	JAIVEN, JACK
STREET ADDRESS	100 CENTURY BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33417
TITLE	V <input type="checkbox"/> Delete
NAME	GLEESON, ANTOINETTE
STREET ADDRESS	100 CENTURY BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33417
TITLE	D <input type="checkbox"/> Delete
NAME	HALPERIN, MAURICE
STREET ADDRESS	100 CENTURY BLVD
CITY-ST-ZIP	W PALM BEACH FL
TITLE	D <input type="checkbox"/> Delete
NAME	HALPERIN, BARRY
STREET ADDRESS	100 CENTURY BLVD
CITY-ST-ZIP	W PALM BEACH FL

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	
TITLE	DVT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jaiven, Jack
STREET ADDRESS	100 Century Blvd.
CITY-ST-ZIP	West Palm Beach, FL 33417
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	

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, 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: *Jack Jaiven* **Jack Jaiven, Vice Pres.** **2/21/01** **(561) 640-3105**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

Additions to 2001 Uniform Business Report
Boca Admin, Inc.
Document #V52766

S
Floyd, Orilla
100 Century Blvd.
West Palm Beach, Fl 33417

Attachment Doc#
V52766

C0046881