## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED Feb 01, 2000 8:00 am Secretary of State DOCUMENT # N94000004946 HOLLYWOOD BUSINESS COUNCIL, INC. 02-01-2000 90112 049 \*\*\*\*61.25 Principal Place of Business Mailing Address 330 N FEDERAL HWY 330 N FEDERAL HWY HOLLYWOOD FL 33020-4617 HOLLYWOOD FL 33020 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0527355 Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) COHN, ALAN B 2021 TYLER ST HOLLYWOOD FL 33020 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** FEE IS \$61.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change Addition TITLE Delete TITLE NAME NAME FISCHLER, ABRAHAM S STREET ADDRESS STREET ADDRESS 3301 COLLEGE AVE CITY-ST-ZIF CITY-ST-ZIP FT LAUDERDALE FL 33314 Delete TITLE DIRECTOR ☐ Change Addition TITLE Schlosberg, Ma NAME CASEY, DANILE A NAME STREET ADDRESS STREET ADDRESS 201 S. BISCAYNE BLVD., #200 CITY-ST-ZIP CITY-ST-ZIP R Love MIAMI FL 33131 🕝 ■ Addition TITLE TITLE D Delete FINZ, SAMUEL A NAME NAME STREET ADDRESS 2600 HOLLYWOOD BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 Change DIRECTOR ☐ Addition ☐ Delete TITLE TITLE MENDELSON, LAURANS A NAME NAME STREET ADDRESS STREET ADDRESS 3000 TAFT ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 Change ☐ Addition TITLE Delete TITLE NAME NAME LITVIN, STUART L STREET ADDRESS STREET ADDRESS 330 N FEDERAL HWY CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 HAIRM AN Delete TITLE Change Addition TITLE NAME COHEN, STEVEN M NAME ee hof STREET ADDRESS 300 S PARK RD 4TH FLOOR STREET ADDRESS 600 CITY-ST-ZIP Hollywood CITY-ST-7IP HOLLYWOOD FL 12. I hereby certify that the information supplied with this filling does not adalify 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

94-927-0277

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