2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: _

SIGNATUR

AND TYPED

FILED Mar 19, 2001 8:00 am **DOCÚMENT # 321028 Secretary of State** 1. Entity Name POLMAR REALTY INC 03-19-2001 90460 042 ***150.00 Principal Place of Business Mailing Address C/O LERMAN AND LERMAN, P.A. C/O LERMAN AND LERMAN, P.A. 48 EAST FLAGLER STREET, PENTHOUSE 101 48 EAST FLAGLER STREET, PENTHOUSE 101 MIAMI FL 33131 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1223043 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LERMAN, ISIDORO Street Address (P.O. Box Number is Not Acceptable) LERMAN AND LERMAN, P.A. 48 EAST FLAGLER STREET, PENTHOUSE 101 **MIAMI FL 33131** 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. (NOTE: Registered Agent Signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/00) ☐ Addition ☐ Delete ☐ Change TITLE TITLE LERMAN, ISIDORO (ASST) NAME NAME STREET ADDRESS STREET ADDRESS 48 E. FLAGLER ST. #101 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 00000 Change TITLE. ☐ Delete ☐ Addition TITLE GINZBURG, SAUL NAME NAME STREET ADDRESS STREET ADDRESS 7901 BISCAYNE POINT CIR CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH, FL 00000 _ - Change Addition-TITLE Delete _ TITLE NAME GINZBURG, BERTHA NAME STREET ADDRESS STREET ADDRESS 7901 BISCAYNE POINT CIR CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH, FL 00000 TITLE Delete TITLE ☐ Change Addition NAME GINZBURG, MITCHELL NAME STREET ADDRESS STREET ADDRESS 7901 BISCAYNE POINT CIRCLE CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL TITI F ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 sustent empowered to execute this peport 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 expowered.

3-13-01

Daytime Phone #