

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001663

1. Entity Name
DOMINION/K REALTY, LLC

Principal Place of Business
LEIDSESTRAAT 67-71
1017 NX AMSTERDAM
THE NETHERLANDS
OC

Mailing Address
C/O TRUMP SERVICE, INC.
P.O. BOX 186
EAST BRUNSWICK NJ 08816

FILED

01 MAY 21 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

51-2231291

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME BELEGGINGSMAATSCHAPPY DE LANGE VELDEN BV
STREET ADDRESS LEIDSESTRAAT 67-71
CITY-ST-ZIP THE NETHERLANDS

☐ Delete

TITLE
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☐ Change ☐ Addition

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TITLE
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CITY-ST-ZIP

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

BELEGGINGSMAATSCHAPPY DE LANGE VELDEN BV

SIGNATURE: By: SIGNATURE REQUIRED

Feb. 26, 2001

3120-620-2526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

002616 AF

CR2E083 (11/00)