## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000027462

Entity Name: PRESIDENTIAL RESORT PROPERTIES, INC.

FILED Apr 30, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 101 N RIVERSIDE DRIVE SUITE 214 POMPANO BEACH, FL 33062 US **New Mailing Address: Current Mailing Address:** 101 N RIVERSIDE DRIVE SUITE 214 POMPANO BEACH, FL 33062 US FEI Number: 65-1087076 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSSO, FRANK 101 N RÍVERSIDE DRIVE SUITE 214 POMPANO BEACH, FL 33062 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: C/D ( ) Delete Title: () Change () Addition ROSSO, FRANK Name: Name: 101 N RIVERSIDE DRIVE SUITE 214 Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 US City-St-Zip: ( ) Delete Title: Title: () Change () Addition CAMPBELL, JAMES Name: Name: 101 N RIVERSIDE DRIVE SUITE 214 Address: Address: POMPANO BEACH, FL 33062 US City-St-Zip: City-St-Zip: Title: Title: T/D ( ) Delete () Change () Addition LIPMAN, RON Name: Name: 101 N RIVERSIDE DRIVE SUITE 214 Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 US City-St-Zip: Title: S/D () Delete Title: () Change () Addition DOURVETAKIS, MINA Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: FRANK ROSSO C/D 04/30/2003

101 N RIVERSIDE DRIVE SUITE 214

POMPANO BEACH, FL 33062 US

Address:

City-St-Zip: