

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90240 015 ***150.00

0963487 AV

DOCUMENT # 315494

1. Entity Name
SEVEN HUNDRED REALTY CORP



Principal Place of Business
C/O N NEWMAN
7328 SW 48TH ST
MIAMI FL 33155
US

Mailing Address
C/O N NEWMAN
7328 SW 48TH ST
MIAMI FL 33155
US

2. Principal Place of Business
USA Commercial
Suite, Apt. #, etc.

3. Mailing Address
15499 W 1st Dixie Hwy
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
North Miami Beach Florida
Zip
33162
Country
USA

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North Miami Beach Florida
Zip
33162
Country
USA

4. FEI Number **13-2600477**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

NEWMAN, NATHAN
7328 SW 48TH ST
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name
Jay S Goldman
Street Address (P.O. Box Number is Not Acceptable)
15499 W 1st Dixie Hwy
City
North Miami Beach **FL** Zip Code
33162

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Jay S Goldman** DATE **4/28/03**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SILVERSTEIN, NATHAN R.
62 OSBORNE TERRACE
NEWARK NJ 07108 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 trustee empowered to execute this report as required by Chapter 607, 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: **Jay S Goldman**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4-28-03** Daytime Phone # **305-216-4324**

CR2E034 (10/02)