

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

05-05-2003 91789 048 ***150.00

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DOCUMENT # F98000002857

1. Entity Name

PEEBLES ATLANTIC DEVELOPMENT CORPORATION



Principal Place of Business
100 SE 2ND ST., SUITE 4650
MIAMI FL 33131

Mailing Address
100 SE 2ND ST., SUITE 4650
MIAMI FL 33131

2. Principal Place of Business

550 BILMORE WAY

3. Mailing Address

550 BILMORE WAY

Suite, Apt. #, etc.

SUITE 970

Suite, Apt. #, etc.

SUITE 970

City & State

CORAL GABLES, FL

City & State

CORAL GABLES, FL

Zip

33134

Country

MIAMI - DADE

Zip

33134

Country

MIAMI - DADE

4. FEI Number

52-1878092

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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

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 \$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	PD	<input type="checkbox"/> Delete
NAME	PEEBLES, R. D	
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	550 BILMORE WAY
CITY-ST-ZIP	MIAMI FL 33131	SUITE 970 CORAL GABLES, FL 33134
TITLE	EVP	<input type="checkbox"/> Delete
NAME	MATLOF, RICHARD	
STREET ADDRESS	100 SE 2ND ST., #4650	550 BILMORE WAY # 970
CITY-ST-ZIP	MIAMI FL 33131	CORAL GABLES, FL 33134
TITLE	T	<input type="checkbox"/> Delete
NAME	GASKELL, JUDITH	
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	550 BILMORE WAY # 970
CITY-ST-ZIP	MIAMI FL 33131	CORAL GABLES, FL 33134
TITLE	SVPS	<input type="checkbox"/> Delete
NAME	KOHLER, MICHELLE	
STREET ADDRESS	100 SE 2ND ST., SUITE 4650	550 BILMORE WAY # 970
CITY-ST-ZIP	MIAMI FL 33131	CORAL GABLES, FL 33134
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

80110802
F98000002857

Peebles Atlantic Development Corporation
550 Biltmore Way

Suite 970
Coral Gables, FL 33134

Paid to the order of:

Florida Department of State
Division of Corporations

P.O. Box 1500
Tallahassee, FL 32302-1500

Entity Name	FEI Number	Fee	Check Number
Peebles Atlantic Development Corporation	52-1878092	\$ 150.00	5671
Total Amount		\$ 150.00	