

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 210652

1. Entity Name
REX THREE, INC.

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90004 043 ***158.75

Principal Place of Business 15431 SW 14TH STREET 15431 SW 14TH ST SUNRISE FL 33326-1937 US	Mailing Address REX THREE, INC. 15431 SW 14TH ST SUNRISE FL 33326-1937 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
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4. FEI Number 59-0859951	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**MILLER, STEPHEN H
 15431 SW 14TH STREET
 SUNRISE FL 33261**

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	MILLER, STEPHEN H	
STREET ADDRESS	15431 S.W. 14TH ST.	
CITY-ST-ZIP	SUNRISE FL	
TITLE	C	<input type="checkbox"/> Delete
NAME	MILLER, JULIUS	
STREET ADDRESS	15432 SW 14TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	SHUSTERMAN, HOWARD	
STREET ADDRESS	15431 SW 14TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	GOLDSTEIN, MELVIN	
STREET ADDRESS	15431 SW 14TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	MILLER, ELEANOR	
STREET ADDRESS	15431 SW 14TH ST	
CITY-ST-ZIP	SUNRISE FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	NASHER, BRUCE	
STREET ADDRESS	15431 SW 14TH ST	
CITY-ST-ZIP	SUNRISE FL	

12. 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		

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: X *[Signature]* DATE: **2/9/2000** (954) 452-8301
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **STEPHEN H. MILLER PRESIDENT**

CR2E034 (9/99)