

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 22, 2000 8:00 am  
Secretary of State

02-22-2000 90025 033 \*\*\*150.00

DOCUMENT # 262713

1. Entity Name

RUTH REGINA, INC.

Principal Place of Business

Mailing Address

RUTH REGINA GLASSER  
1050 KANE CONCOURSE  
BAY HARBOR FL 33154

RUTH REGINA GLASSER  
1050 KANE CONCOURSE  
BAY HARBOR FL 33154-2107

00023918



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-0973616

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PANKEN, RUTH REGINA  
1050 KANE CONCOURSE  
BAY HARBOR FL 33154

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Delete
NAME	PANKEN, RUTH REGINA	
STREET ADDRESS	1050 KANE CONCOURSE	
CITY-ST-ZIP	BAY HARBOR FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	SHENBERG, MITCHELL	
STREET ADDRESS	P.O. BOX 430308, N/A	
CITY-ST-ZIP	MIAMI FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	WEIN, MARLANA	
STREET ADDRESS	3301 N CNTRY CLUB DR 105	
CITY-ST-ZIP	N MIAMI BCH. FL	
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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 changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

RUTH REGINA, INC.

2/16/00

305-866-1224