2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 25, 2001 8:00 am
Secretary of State
01-25-2001 90133 001 ***150.00

DOCUMENT # 280514

1. Entity Name
ALAN & LEE REALTY CORP

Principal Place of Business	Mailing Address
7597 CINEBAR DR BOCA RATON FL 33433 US	7597 CINEBAR DR BOCA RATON FL 33433 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7597 Cinebar Dr	same
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Boca Raton, Fl.	City & State
Zip: 33433 Country: USA	Zip Country

4. FEI Number 59-1061651 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KESSLER, BERNARD J. ESQ
1770 E LAS OLAS BLVD, #307
FT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name: Bernard J. Kessler, Esq.
Street Address (P.O. Box Number is Not Acceptable): 6109 Balboa Circle #~~103~~
Suite 103
City: Boca Raton FL Zip Code: 33433

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: Bernard J. Kessler 1/5/01
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, 2001 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	VPTS KESSLER, BERNARD J 6109 BALBOA CIR # 103 BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDST MITCHEL, TAMARA 7597 CINEBAR DR BOCA RATON FL 33433	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MITCHEL, ALAN 6839 MERCER WAY MERCER ISLAND WA 98040	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS TOLLMAN, LAUREN 3720 CANTERBURY WAY BOCA RATON FL 33434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS STOLLMAN, LAUREN 3720 CANTERBURY WAY BOCA RATON FL 33434	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

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: Tamara Mitchel, Pres. TAMARA MITCHEL 1/5/01 561-750-0439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #