

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 286669

1. Entity Name

IMPERIAL WOODBURY, INC.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90051 028 ***150.00

Principal Place of Business

Mailing Address

1815 N SURF RD
HOLLYWOOD FL 33019

1815 N SURF RD
HOLLYWOOD FL 33019-3457

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1142585

Applied For

Not Applicable

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

TEITELBAUM, GERALD
1820 BAY ROAD
MIAMI BEACH FL 33139

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 SD ☐ Delete
NAME DECIUTILIS, MARIO
STREET ADDRESS 612 SHAKER RD
CITY-ST-ZIP LONGMEADOW MA 01106-2417

TITLE P ☐ Change ☒ Addition
NAME TEITELBAUM, GERALD
STREET ADDRESS 1820 BAY ROAD
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE D ☐ Delete
NAME PALOZZI, DOMENIC
STREET ADDRESS 1815 N SURF RD
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ Change ☒ Addition
NAME GAGNON, CAMILIEN
STREET ADDRESS 1815 N SURF RD
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ Delete
NAME PALOZZI, CHRISTIE
STREET ADDRESS 1815 N SURF RD
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ Change ☒ Addition
NAME SCHNEIDERMAN, SETH
STREET ADDRESS 1815 N SURF RD
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ Delete
NAME POPOLIZIO, JR. VINCENT
STREET ADDRESS 1803 SHETLAND ROAD
CITY-ST-ZIP NAPERVILLE IL

TITLE D ☐ Change ☒ Addition
NAME FONTANESI, VIRGINIA
STREET ADDRESS 1815 N SURF RD
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ Delete
NAME PALOZZI PALUMBO, LOIS
STREET ADDRESS 1815 N. SURF RD
CITY-ST-ZIP HOLLYWOOD FL

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

TITLE D ☐ Delete
NAME JACQUES, CLAUDE
STREET ADDRESS 508 EDWARD STREET, HEARST, ONTARIO
CITY-ST-ZIP CANADA PO

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald Teitelbaum

Date

Daytime Phone #

3-8-00

CR2E034 (9/99)