

# 2000 UNIFORM BUSINESS REPORT (UBR)

0130617

DOCUMENT # 333750 "AMENDED 2000 REPORT"

1. Entity Name

2775 CORP.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT 16 AM 10:35

Principal Place of Business

Mailing Address

2775 W OKEECHOBEE ROAD  
HIALEAH FL 33010

2775 W OKEECHOBEE ROAD  
HIALEAH FLA 33010-1057

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1218952

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PRUSSIN, RUBIN  
2775 W OKEECHOBEE RD  
HIALEAH FL 33010

7. Name and Address of New Registered Agent

Name: GINSBURG, MURRAY  
Street Address (P.O. Box Number is Not Acceptable):  
2775 W. OKEECHOBEE RD.  
City: HIALEAH FL Zip Code: 33010

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

10/12/00

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

FILE NOW!!! FEES \$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	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	CHANGE	ADDITION
PD	PRUSSIN, RUBIN	2775 W. OKEECHOBEE RD.	HIALEAH FL	<input checked="" type="checkbox"/>	PD	GINSBURG, MURRAY	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SD	GINSBURG, MURRAY	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input checked="" type="checkbox"/>	SD	GINSBURG, ANDREW	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D	PRUSSIN, OTTILIE	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input checked="" type="checkbox"/>	D	DAVIS, RANDY	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T	GINSBURG, ANDREW	2775 W. OKEECHOBEE RD.	HIALEAH, FL 33010	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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-10/26/00-01849-014  
\*\*\*\*\*61.25 \*\*\*\*\*61.25

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

10/12/00

Date

305-887-6570

Daytime Phone #

CR2E034 (9/99)

AD