

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90111 047 ***150.00

DOCUMENT # 401132

1. Entity Name
FIRST AMERICAN REALTY, INC.

Principal Place of Business
147 ALHAMBRA CIR. #S-100
CORAL GABLES FL 33134

Mailing Address
147 ALHAMBRA CIR. #S-100
CORAL GABLES FL 33134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9745 S.W. 72nd street
 Suite, Apt. #, etc.
Suite 114-D

3. Mailing Address
P.O. Box 143550
 Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
59-1401933

Applied For
 Not Applicable

Zip
33173

Country
USA

Zip
33114-3550

Country
USA

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

6. Name and Address of Current Registered Agent

ROJAS, EDUARDO
147 ALHAMBRA CIR. #S-100
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
9745 S.W. 72nd Street
 City **Miami** **FL** Zip Code **33173**

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 *Eduardo Rojas* (Eduardo Rojas, Registered Agent) 4-28-02
 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, 2002 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 ☐ Delete
 NAME **PTD ROJAS, EDUARDO**
 STREET ADDRESS **3020 SW 77TH COURT**
 CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
 NAME **SD COHEN, HAROLD J**
 STREET ADDRESS **4651 S.W. 72ND AVENUE**
 CITY-ST-ZIP **MIAMI FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **5700 S.W. 127 Ave # 1316**
 CITY-ST-ZIP **Miami, FL 33183**

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

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

TITLE ☐ Change ☐ Addition
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 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 Required* **ROJAS, DIRECTOR** 4-28-02 305-448-0923
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)