## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## **FILED** Feb 26, 2001 8:00 am Secretary of State **DOCUMENT # 404118** 1. Entity Name BETTY DAIN, CREATIONS, INC. 02-26-2001 90515 035 \*\*\*150.00 Principal Place of Business Mailing Address 3300 N.W. 110 ST 3300 N.W. 110 ST MIAMI FL 33167 MIAMI FL 33167 626316 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-1541407 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name - -LEEBOW, GERALD Street Address (P.O. Box Number is Not Acceptable) 3300 N.W. 110 ST. **MIAMI FL 33167** Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filling requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition DTS □ Delete TITLE TITLE NAME NAME LEEBOW, HARRIET STREET ADDRESS STREET ADDRESS 3300 N.W. 110 ST CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33167** ☐ Addition Change ☐ Delete TITLE TITLE VD. NAME NAME LEEBOW, RICHARD STREET ADDRESS STREET ADDRESS 3300 N.W. 110 ST CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33167** ☐ Change Addition TITLE ☐ Delete TITLE PD NAME LEEBOW, GERALD NAME STREET ADDRESS STREET ADDRESS 3300 N.W. 110 ST CITY-ST-ZIP CITY-ST-7IP **MIAMI FL 33167** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME LEEBOW, DONALD M NAME STREET ADDRESS STREET ADDRESS 3300 N.W. 110 ST CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33167** ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information surplied 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 of master empowered to execute this regard as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment of the receiver of master execute this regard as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if