

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90931 022 ***150.00

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DOCUMENT # 420486

1. Entity Name
FORTUNE REALTY, INC.



Principal Place of Business
**3251 N. FEDERAL HWY
BOCA RATON FL 33431
US**

Mailing Address
**3251 N. FEDERAL HWY
BOCA RATON FL 33431
US**



2. Principal Place of Business
1612 NW 2nd Ave

Suite, Apt. #, etc.
Suite 11

City & State
Boca Raton, FL

Zip
33431

Country
USA

3. Mailing Address
1612 NW 2nd Ave

Suite, Apt. #, etc.
Suite 11

City & State
Boca Raton FL

Zip
33431

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
59-1483971

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**REINHART, SCOTT A
7600 TEXAS TRAIL
BOCA RATON FL 33487**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

scott Reinhart

3/26/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PST
REINHART, SCOTT
7600 TEXAS TRL
BOCA RATON FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
MANIC-REINHART, PEARL
7600 TEXAS TRAIL
BOCA RATON FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other live employees.

SIGNATURE:

SIGNATURE REQUIRED

scott Reinhart

3/26/03

561-703-8126

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)