

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90124 050 ***150.00

DOCUMENT # 471740

1. Entity Name
SKYLAKE REALTY, INC.

Principal Place of Business
1859 NE 185TH STREET
NORTH MIAMI BCH FL 33179

Mailing Address
1865 N.E. 185TH ST.
NORTH MIAMI BCH FL 33179

2. Principal Place of Business

3. Mailing Address
1859 NE 185TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
NORTH MIAMI BEACH, FLA

Zip

Country

Zip
33179

Country
USA

4. FEI Number **59-1595284**

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

RITTER, JUNE
1865 N.E. 185TH ST.
NORTH MIAMI BCH FL 33179

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **P** ☐ Delete
NAME **RITTER, JUNE**
STREET ADDRESS **410 ST ANDREWS RD**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

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

TITLE **ST** ☐ Delete
NAME **RITTER, JUNE**
STREET ADDRESS **410 ST ANDREWS RD**
CITY-ST-ZIP **HOLLYWOOD FL 33021**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 11, 2002 **805-981-7375**
Daytime Phone #

CR2E034 (4/02)



Stylake Realty Inc.

Atty. General
471740
121501

1859 N.E. 185th Street
(MIAMI GARDENS DRIVE)
North Miami Beach, Florida 33179

Phone: (305) 931-5375
Fax: (305) 932-3253

Division of Corporations
Uniform Business Report Filings
P.O. BOX 1500
Tallahassee, FL 32302-1500

Dear Sirs:

Apparently, I did not receive this years Business Report in the mail. It was possibly due to the fact that my mailing address is not "1865 N.E. 185th Street". I had my office moved to 1859 N.E. 185th Street. 1865 is a rehabilitation clinic.

I would have surely paid on time had I received the invoice. I am truly sorry for your inconvenience. My check for \$150.00 is enclosed.

Respectfully yours;

Carl Ritter, Realtor-Broker