

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 527608**

1. Entity Name

APPRAISAL AND REAL ESTATE ECONOMICS ASSOCIATES,

Principal Place of Business

**9400 S DADELAND BLVD
PENTHOUSE ONE
MIAMI FL 33156
US**

Mailing Address

**9400 S DADELAND BLVD
PENTHOUSE ONE
MIAMI FL 33156
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1729352**

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

**CANNON, MICHAEL Y
9400 S DADELAND BLVD
PENTHOUSE ONE
MIAMI FL 33156**

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.

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 \$150.00
After MAY 1, 2001 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	<input type="checkbox"/> Delete
V	KATZ, JAY B.	9400 S DADELAND BLVD., PH1	MIAMI FL 33156	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	MICHAEL Y. CANNON	9400 S DADELAND BLVD PENTHOUSE ONE	MIAMI FL	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
		MIAMI FL 33156		<input type="checkbox"/>	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
V	DABBY, DAVID M	9400 S DADELAND BLVD PH 1	MIAMI FL 33156	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
V	VALERA, JOSE E.	9400 S DADELAND, BLVD PH1	MIAMI FL	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
		MIAMI FL 33156		<input type="checkbox"/>	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
V	YEOMANS, DAVID BC J	161 SW 23 ROAD	MIAMI FL	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
V	YEOMANS, DAVID BC JR.	9400 S DADELAND BLVD PH1	MIAMI FL 33156	<input checked="" type="checkbox"/>	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
V	CANNON, MARK A.	9400 S DADELAND BLVD., PH1	MIAMI FL 33156	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
VD				<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01

Date

(305) 670-0001

Daytime Phone #

MICHAEL Y. CANNON

CR2E034 (10/00)

Attachment

APPRAISAL AND REAL ESTATE ECONOMICS ASSOCIATES, INC.
FEI NUMBER 59-1729352

DOCUMENT #527608

SECTION 11

ADDITIONAL OFFICERS AND DIRECTORS

835527

D
LIBRIZZI, CINDY B.
9400 S DADELAND BLVD, PH-1
MIAMI, FL 33156

S/T/D
WIENER, WILLIAM
9400 S DADELAND BLVD., PH-1
MIAMI, FL 33156