## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Feb 19, 2001 8:00 am DOCUMENT # 531015 Secretary of State 1. Entity Name LUKE REDIGAN ENTERPRISES, INC. 02-19-2001 90042 005 \*\*\*150.00 Principal Place of Business Mailing Address 11820 N.W. 41ST STREET 11820 N.W. 41ST STREET 718096 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1760805 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name REDIGAN REDIGAN, LUKE Street Address (P.O. Box Number is Not Acceptable) 1800 S OCEAN BLVD **BOCA RATON FL 33432** 1800 S.OCEAN BLVD. 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 11. 12, Addition TITLE STD Delete TITLE NAME REDIGAN, VIRGINIA A STREET ADDRESS STREET ADDRESS 1800 S OCEAN BLVD, VILLA E CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** ☐ Addition ☐ Delete REDIGAN LUKE NAME REDIGAN, LUKE JR 1800 5 OCEAN STREET ADDRESS STREET ADDRESS 1800 S OCEAN BLVD, VILLA E CITY-ST-ZIP CITY-ST-ZIP BOCK RATON **BOCA RATON FL 33432** ☐ Delete TITLE ☐ Change Addition TITLE NAME REDIGAN, LUKE JR NAME STREET ADDRESS STREET ADDRESS 2201 E MAYA PALM DR ĆITÝ-ST-ŽIŘ CITY-ST-7P **BOCA RATON FL 33432** ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME SACK, LUCIA R. NAME STREET ADDRESS STREET ADDRESS 7415 N.W. 74TH DR. CITY-ST-ZIP CITY-ST-ZIP PARKLAND FL TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 suppliemental peporphs 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 on the repeiver or trustee expowered 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 attatyment with an addriss, with all offer like propowered.