

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 554223

1. Entity Name

F T W ENTERPRISES, INC.

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90001 017 \*\*\*150.00

Principal Place of Business  
26810 S.W. 192 AVE  
HOMESTEAD FL 33031

Mailing Address  
26810 S.W. 192 AVE  
HOMESTEAD FL 33031-3719

912134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number 59-1769566  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
COPEN, GARY P.  
407 LINCOLN RAD, SUITE 7-L  
MIAMI BEACH FL 33139

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.

SIGNATURE \_\_\_\_\_ (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, 2000 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

| TITLE | NAME             | STREET ADDRESS     | CITY-ST-ZIP        | <input type="checkbox"/> Delete |
|-------|------------------|--------------------|--------------------|---------------------------------|
| P     | FRANKEL, LEE     | 26810 S.W. 192 AVE | HOMESTEAD FL 33031 |                                 |
| VS    | FRANKEL, KRISTEN | 26810 SW 192 AVE   | HOMESTEAD FL 33031 |                                 |
|       |                  |                    |                    |                                 |
|       |                  |                    |                    |                                 |
|       |                  |                    |                    |                                 |
|       |                  |                    |                    |                                 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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: LEE H. FRANKEL 1-28-00 305-889-1887

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)