2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: \(\(\perp\)

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # 600182 Apr 03, 2000 8:00 am 1. Entity Name FALICK & ASSOCIATES, P.A. Secretary of State 04-03-2000 90183 006 ***150.00 Mailing Address Principal Place of Business 14411 S. DIXIE HWY C/O HMPD 16100 NE 16 AVE **#S-209** MIAMI FL 33176-7939 NORTH MIAMI BEACH FL 33162-4708 US 2. Principal Place of Business 3. Mailing Address 3275 W. Hillsboro Blvd 3275 W. Hillsboro Blvd DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 300 308 4. FE! Number Applied For City & State City & State 59-1003233 Deerfield Beach, FL Not Applicable Deerfield Beach, Country Country \$8.75 Additional 5. Certificate of Status Desired 33442 USA 33442 Fee Required USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FALICK GERALD Street Address (P.O. Box Number is Not Acceptable) 74411 S. DIXIE HWY <u>3275 W. Hillsboro Boulevard #300</u> **#8-200** MIAMI-FL-33176 Zip Code 33442 Deerfield Beach 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) Signature, typed or printed name of registered agent and title if applicable. 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. PTD TITLE 3 Change ☐ Addition ☐ Delete TITLE FALICK.GERALD R NAME NAME STREET ADDRESS STREET ADDRESS 14411 S. DIXIE HWY, #S-209 3275 W. Hillsboro Blvd #300 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Deerfield Beach, FL ☐ Addition SD ☐ Delete TITLE Change TITLE FALICK, RONA NAME NAME STREET ADDRESS STREET ADDRESS 14411 S. DIXIE HWY, #S-209 3275 W. Hillsboro Blvd #300 CITY-ST-7IP CITY-ST-ZIP MIAM! FL Deerfield Beach, FL 33442 ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ation 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 plemental 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 for 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 with an address, with all other like empowered. 13. I hereby certify that the inforindicated on this report or changed, or on an attachmer

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