

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 644137

1. Entity Name  
POLANG INVESTMENT COMPANY, INC.

FILED  
Apr 19, 2001 8:00 am  
Secretary of State

04-19-2001 90043 024 \*\*\*150.00

Principal Place of Business  
7770 WEST OAKLAND PARK BLVD.  
STE. 320  
SUNRISE FL 33351  
US

Mailing Address  
7770 WEST OAKLAND PARK BLVD.  
STE. 320  
SUNRISE FL 33351  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
7481 W OAKLAND PARK BLVD  
Suite, Apt. #, etc.  
STE 301

3. Mailing Address  
7481 W. OAKLAND PARK BLVD  
Suite, Apt. #, etc.  
STE 301

City & State  
LAUDERHILL FL

City & State  
LAUDERHILL FL

Zip  
33319

Country  
USA

Zip  
33319

Country  
USA

4. FEI Number 59-2031079

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
LANG, IRVING  
7770 WEST OAKLAND PARK BLVD.  
STE. 320  
SUNRISE FL 33351

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
7481 W. OAKLAND PARK BLVD  
STE 301  
City LAUDERHILL FL Zip Code 33319

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 Irving Lang Pres. DATE 04/06/01  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LANG, IRVING 7770 WEST OAKLAND PARK BLVD. SUNRISE FL 33351 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POWELL, GERALD 7770 WEST OAKLAND PARK BLVD. SUNRISE FL 33351 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7481 W. OAKLAND PARK BLVD STE 301 LAUDERHILL FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7481 W. OAKLAND PARK BLVD STE 301 LAUDERHILL FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Irving Lang Pres. DATE 04/06/01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (10/00)