

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 674439

1. Entity Name

REID PROPERTIES, INC.

**FILED**  
**Apr 03, 2000 8:00 am**  
**Secretary of State**

04-03-2000 90148 024 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

1801 S.W. 102ND AVE.  
STE 30  
MIAMI FL 33165  
US

1801 S.W. 102ND AVE.  
STE 30  
MIAMI FL 33165-7425  
US

2. Principal Place of Business

3540 S. W. 185 Ave.

3. Mailing Address

3540 S. W. 185 Ave.

- Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miramar, FL

City & State

Miramar, FL

Zip

33029

Country

USA

Zip

33029

Country

USA

4. FEI Number

59-2120823

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

REID, ROBERT B  
1801 S.W. 102ND AVE.  
MIAMI, FL  
33165

7. Name and Address of New Registered Agent

Name

REID, ROBERT B.

Street Address (P.O. Box Number is Not Acceptable)

3540 S. W. 185 Ave.

City

Miramar, FL

FL

Zip Code

33029

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 3/29/00

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 PD ☐ Delete  
NAME REID, ROBERT B  
STREET ADDRESS 1801 SW 102 AVE  
CITY-ST-ZIP MIAMI FL

TITLE DS ☐ Delete  
NAME REID, OTMARA  
STREET ADDRESS 1801 SW 102 AVE  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME REID, ROBERT B.  
STREET ADDRESS 3540 S.W. 185 Ave.  
CITY-ST-ZIP Miramar, FL 33029

TITLE DS ☒ Change ☐ Addition  
NAME REID, OTMARA  
STREET ADDRESS 3540 S. W. 185 Ave.  
CITY-ST-ZIP Miramar, FL 33029

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/00

Date

954-447-7587

Daytime Phone #

CR2E034 (9/99)