

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 830216

1. Entity Name

ANOVIV REALTY CO., INC.

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90240 047 ***150.00

0574635

Principal Place of Business

Mailing Address

24 FEDERAL RD

24 FEDERAL RD

ENGLISHTOWN NJ 07726

ENGLISHTOWN NJ 07726

MONROE Twp NJ

MONROE Twp NJ

08831

08831

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MONROE Twp NJ

MONROE Twp NJ

Zip

Country

Zip

Country

08831

USA

08831

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VIVONA, DOMINIC
9424 SW 142ND STREET
MIAMI FL 33176

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

Signature, typed or printed name of registered agent and title if applicable.

(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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete
NAME VIVONA, MORRIS
STREET ADDRESS 1 GLENN RD
CITY-ST-ZIP WEST CALDWELL NJ

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

TITLE VD ☐ Delete
NAME VIVONA, S.
STREET ADDRESS 7722 SW 169 TERR
CITY-ST-ZIP MIAMI FL

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

TITLE SD ☐ Delete
NAME VIVONA, DOMNIC
STREET ADDRESS 9424 SW 142 ST.
CITY-ST-ZIP MIAMI FL

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

TITLE TD ☐ Delete
NAME VIVONA, PHILIP
STREET ADDRESS 24 GLENWOOD DRIVE
CITY-ST-ZIP COLTS NECK NJ

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

TITLE PD ☐ Delete
NAME VIVONA, JOHN
STREET ADDRESS 7275 S.W. 137TH ST
CITY-ST-ZIP MIAMI FL

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

TITLE ☐ Delete
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

Date

Daytime Phone #

CR2E034 (10/00)