

2011 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000006362

1. Entity Name
DALUZ NYC INC.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 29 PM 4:47

Principal Place of Business Mailing Address
5900 COLLINS AVE #607 5900 COLLINS AVE #607
MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33140

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 13-4017821

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIEB, BRUCE
440 ALEXANDRA CIRCLE
WESTON, FL 33326

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) ☐

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 NAME PRESIDENT
STREET ADDRESS DALUZ, LAWRENCE
CITY-ST-ZIP 5900 COLLINS AVE #607
MIAMI BEACH, FL 33140 ☐ Delete

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 100004691571--5
CITY-ST-ZIP -11/21/01--01090--012
****550.00 ****550.00

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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: *Lawrence Daluz* President

10/24/01

CR2E034 (11/00)

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Lawrence DaLuz
DaLuz NYC Inc.
5900 Collins Ave. #607
Miami Beach, FL 33140

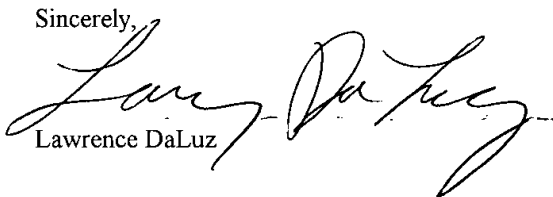
October 24, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I previously filed the 2001 Uniform Business Report on 9/15/01 and sent it with a check for \$ 550. Apparently the report and check were lost in the mail and subsequent to that I received a notice of administrative dissolution. Upon speaking to one of your representatives on the telephone, I was told that if I explained the situation and sent a new report along with a check for \$ 550 the state of Florida would reinstate corporation and stop the pending dissolution. Your prompt attention to this matter is appreciated.

Sincerely,


Lawrence DaLuz