954-252-1560

## **2002 UNIFORM BUSINESS REPORT (UBR)**

**SIGNATURE:** 

2002 UNIFORM BUSINESS REPORT (UBR)							FILED				
DOCUMENT # F35074  1. Entity Name							Feb 21, 2002 8:00 am Secretary of State				
BUSINES	S ESTATE	S BUREAU, INC.					02-21-2002	90089 02	?0 <b>***</b> 150	0.00	
Principal Plac	e of Business		Mailing Address								
6861 SW 196 FT LAUDERD	AVENUE ALE FL 33332		6861 SW 196 AVENUE FT LAUDERDALE FL 33332								
2. Principal Place of Business  3. Mailing Add  Suite, Apt. #, etc.  Suite, Apt. #											
City & Stat	City & State				DO NOT WRITE IN THIS SPACE  4. FEI Number Applied For						
Zip Country			Zip Country			_	59-0601738	_ <	<del></del>	t Applicable	
	6. Name and Address of Current				<u>,                                     </u>	Certificate of Status Desired					
		and Address of Current A	egistered Agent		Name			ogiotoioa A	94		
KAPLAN, DON 6861 SW 196 AVENUE					Street Address (P.O. Box Number is Not Acceptable)						
FT LAUDERDALE FL 33332									Zip Code	,	
9. The chous	acmod antitu	aubmits this statement for	the oursess of changing its	ragietora	City	tored ac	gent, or both, in the State of Flo	FL	Zip Code	,	
<b>8.</b> The above	named entity	submits this statement for	the purpose of changing its	s registere	a onice or regis	reien aç	gent, or both, in the state of the	mua.			
SIGNATURE ,	Signature, typed or	printed name of registered agent ar	d title if applicable. (NOT	E; Registered	Agent signature requ	ired when r	einstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable					vill be \$550.00		10. Election Campaign Fir Trust Fund Contribution			May Be to Fees	
11.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AND D		12.			L DDITIONS/CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11	
TITLE NAME	PSD MOECKER	MF	☐ Delete	TITLE NAMÉ					☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	6861 SW 1	96 AVENUE RDALE FL 33332			T ADDRESS ST- ZIP						
TITLE NAME	V KAPLAN, D	ION	☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	6861 SW 1	96 AVENUE			T ADDRESS ST-ZIP						
TITLE	FI LAUDEI	RDALE FL 33332	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			نے دیاج بسیمجھ کے وہادی		T ADORESS ST-ZIP		and the second s	-			
TITLE NAME	-		☐ Delete	TITLE					Change	☐ Addition	
STREET ADDRESS				STREE	T ADDRÉSS ST-ZIP						
CITY-ST-ZIP TITLE			☐ Delete	TITLE	51-217	· · · -			☐ Change	Addition	
NAME STREET ADDRESS					T ADDRESS ST-ZIP						
TITLE		<u> </u>	☐ Delete	TITLE			,		☐ Change	☐ Addition	
NAME STREET ADDRESS				NAME STREE	T ADDRESS						
CITY-ST-ZIP			fair fillian along the fillians along the		ST-ZIP	Co-ti	110 07/9/6\ Flasida Chalda	I further = ===	fu that tha !-	formation	
indicated of the corchanged	certify that the fon this report poration or the for on an attac	information supplied with to or supplemental report is to receive or trustee empor chment with an address, w	riis illing does not qualify to true and accurate and that i wered to execute this report ith all offer like empowered	ir the exen my signati t as require t.	ipuori stated in ure shall have the ed by Chapter (	section ne same 607, Flor	119.07(3)(i), Florida Statutes. legal effect as if made under ida Statutes; and that my nam	path; that I ar e appears in	n an officer of Block 11 or	or director Block 12 if	