

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90112 016 ***150.00

DOCUMENT # F42993

1. Entity Name
A-1 INVESTORS, INC.

Principal Place of Business

**6135 NW 167TH ST
E-28
MIAMI FL 33015
US**

Mailing Address

**6135 NW 167TH ST
E-28
MIAMI FL 33015
US**

2. Principal Place of Business

**6521 Cowpen Road
Suite, Apt. #, etc.
G-102**

3. Mailing Address

**P.O. Box 170336
Suite, Apt. #, etc.**

City & State

Miami Lakes, FL

City & State

Hialeah, FL

Zip

33014

Country

USA

Zip

33017

Country

USA

4. FEI Number

59-2118618

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SUPERSTEIN, NORMAN CPA
1108 KANE CONCOURSE, SUITE 309
BAY HARBOR ISLANDS FL 33154**

7. Name and Address of New Registered Agent

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, 2002 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 **STD** ☐ Delete
NAME **BADER, HERMAN**
STREET ADDRESS **64 EDWARDS ST APT 1B**
CITY-ST-ZIP **LONG ISLAND NY**

TITLE **VP/T/D** ☐ Delete
NAME **Robert W. Bader**
STREET ADDRESS **649 PARK AVE.**
CITY-ST-ZIP **Huntington, NY 11743**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/S/D** ☒ Change ☐ Addition
NAME **HERMAN BADER**
STREET ADDRESS **64 EDWARDS ST. Apt 1B**
CITY-ST-ZIP **Long Island, NY**

TITLE **VP/T** ☐ Change ☒ Addition
NAME **Robert W. Bader**
STREET ADDRESS **649 PARK AVE**
CITY-ST-ZIP **Huntington, N.Y 11743**

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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:

Herman Bader
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-19-02
Date

305-823-8776
Daytime Phone #

CR2E034 (9/01)