

# 2000 UNIFORM BUSINESS REPORT (UBR)

051537

DOCUMENT # F92000000906

1. Entity Name

RUG PROPERTIES CORP.

FILED

00 APR 19 AM 10:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

600 CENTRAL AVE  
SUITE 365  
HIGHLAND PARK FL 60035

600 CENTRAL AVE  
SUITE 365  
HIGHLAND PARK FL 60035-3257

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

88-0260428

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FELNER, JAY  
4182 LIVE OAK BLVD  
DELRAY BEACH FL 33445

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME VD  
STREET ADDRESS LEFKOVITZ, EDWIN  
CITY-ST-ZIP 34500 FOX RIDGE DR  
EVERGREEN CO 80439

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 800003238348--3  
CITY-ST-ZIP -05/03/00--01131--024  
\*\*\*\*150.00 \*\*\*\*150.00

TITLE ☐ Delete  
NAME PD  
STREET ADDRESS SCHWARTZBERG, ALBERT  
CITY-ST-ZIP 50 MAIN STREET SUITE 435  
WHITE PLAINS NY 10606

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

TITLE ☐ Delete  
NAME VD  
STREET ADDRESS NESHEK, THOMAS  
CITY-ST-ZIP 14 E. WALWORTH ST.  
ELKHORN WI 53121

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

TITLE ☐ Delete  
NAME VD  
STREET ADDRESS FELNER, JEFFREY  
CITY-ST-ZIP 4236 PINE HOLLOW CIR  
GREEN ACRES FL 33463

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

TITLE ☐ Delete  
NAME SD  
STREET ADDRESS GOLDMAN, ROBERT U  
CITY-ST-ZIP 600 CENTRAL AVE., #365  
HIGHLAND PARK IL 60035

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

TITLE ☐ Delete  
NAME TD  
STREET ADDRESS WAGNER, SUSAN  
CITY-ST-ZIP 600 CENTRAL AVE., #365  
HIGHLAND PARK IL 60035

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.

RUG Properties Corp.

KE

SIGNATURE:

By: Robert U. Goldman, Sect.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-22-00

Daytime Phone #

(847) 432-3666

CR2E034 (9/99)