

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000004168

1. Entity Name
EMALFARB INVESTMENT CORPORATION, LTD.

Principal Place of Business Mailing Address
140 INTRACOASTAL POINTE DRIVE, SUITE 404 140 INTRACOASTAL POINTE DRIVE, SUITE 404
JUPITER FL 33477 JUPITER FL 33477

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 36-3414412 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

EMALFARB, MARK A
%EMALFARB INVESTMENTS
140 INTRACOASTAL POINTE DRIVE, #404
JUPITER FL 33477

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	PSTD	<input type="checkbox"/> Delete
NAME	EMALFARB, MARK A	
STREET ADDRESS	193 SPYGLASS COURT	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/01)

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

FILED
Jul 08, 2002 8:00 am
Secretary of State

07-08-2002 90229 002 ***150.00



DO NOT WRITE IN THIS SPACE

4-12-02

Attachment # F930000641687
119248
Emalfarb Investment Corporation
140 Intracoastal Pointe Drive, Suite 404
Jupiter, FL 33477

July 1, 2002

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

Re: Emalfarb Investment Corporation
FEI Number: 36-3414412

Dear Sir/Madam:

Enclosed please find check number 1013 in the amount of \$150.00 for payment of the UBR fees for Emalfarb Investment Corporation.

Please be advised that the check that I submitted back in April along with the executed original Florida Uniform Business Report has not cleared the bank. When I contacted the State on Friday, June 28th I was told to re-submit a new check along with a copy of the signed Report.

I trust that this mishap will permit me to register the Uniform Business Report accordingly.

Please do not hesitate to contact me if you have any questions.

Regards,



Mark Emalfarb
Emalfarb Investment Corporation

Enc.