

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F94000002482**

1. Entity Name  
**LADSTOCK SECOND CORPORATION**

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90858 001 \*1,050.00

Principal Place of Business <b>901 PONCE DE LEON BLVD 7TH FLOOR CORAL GABLES FL 33134 US</b>	Mailing Address <b>901 PONCE DE LEON BLVD 7TH FLOOR CORAL GBALE S 33134-3073 US</b>
---	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number <b>13-3153590</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES INC  
9200 SOUTH DADELAND BLVD.  
SUITE 508  
MIAMI FL 33156**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DPS</b> <b>NOBLE, JEREMY MICHAEL</b> <input type="checkbox"/> Delete <b>MAPLE CT CENTRAL PARK REEDS CRESCENT</b> <b>WATFORD HE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>LIERMAN, E P</b> <input type="checkbox"/> Delete <b>901 PONCE DE LEON BLVD STE 700</b> <b>CORAL GABLES FL 33134</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BALLINGAL, ROBERT</b> <input type="checkbox"/> Delete <b>CHANCEL HOUSE NEASDEN LANE</b> <b>LONDON NW102XE UK</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DYSON, IAN</b> <input checked="" type="checkbox"/> Delete <b>MAPLE CT CENTRAL PARK REEDS CRESCENT</b> <b>WATFORD HE</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT</b> <b>VESELENO, ERLINDA</b> <input type="checkbox"/> Delete <b>901 PONCE DE LEON BLVD, STE 700</b> <b>CORAL GABLES FL</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **Paul Lierman, Vice President** 305-444-6811  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)