

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90202 022 ***158.75

DOCUMENT # F96000000220

1. Entity Name

STRATEGIC CAPITAL RESOURCES, INC.

Principal Place of Business

~~2500 MILITARY TRAIL NORTH~~
~~260~~
~~BOCA RATON FL 33431~~
~~US~~

Mailing Address

~~2500 MILITARY TRAIL NORTH~~
~~260~~
~~BOCA RATON FL 33431~~
~~US~~

2. Principal Place of Business

7900 GLADES RD.

3. Mailing Address

7900 GLADES RD.

Suite, Apt. #, etc.

610

Suite, Apt. #, etc.

610

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL 33434

Zip

33434

Country

US

Zip

33434

Country

US

4. FEI Number

11-3289981

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, DAVID

3565 NW 61ST CIRCLE

BOCA RATON FL 33496

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 **VPCD** ☐ Delete
 NAME **KUSHAY, JOHN P**
 STREET ADDRESS **618 CYPRESS GREEN CIRCLE**
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **VPD** ☒ Delete
 NAME **KUSHAY, JOAN E**
 STREET ADDRESS **618 CYPRESS GREEN CIR**
 CITY-ST-ZIP **WELLINGTON FL 33414**

TITLE **CD** ☐ Delete
 NAME **MILLER, DAVID**
 STREET ADDRESS **2500 MILITARY TRAIL NORTH STE 260**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **SVPD** ☒ Delete
 NAME **LEBLOND, RICHARD K III**
 STREET ADDRESS **2500 MILITARY TRAIL NORTH**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SECRETARY AND DIRECTOR** ☐ Change ☒ Addition
 NAME **SAMUEL E. WEISS**
 STREET ADDRESS **30 MAIN STREET**
 CITY-ST-ZIP **PORT WASHINGTON, NY 11050**

TITLE **VP & ASST. PRES.** ☐ Change ☒ Addition
 NAME **SCOTT MILLER**
 STREET ADDRESS **7900 GLADES RD, SUITE 610**
 CITY-ST-ZIP **BOCA RATON, FL 33434**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **RALPH WILSON**
 STREET ADDRESS **7 ENSIGN LANE**
 CITY-ST-ZIP **MASSAQUEUA, NY**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **KENNETH MACKENZIE**
 STREET ADDRESS **114 S. FEDERAL HWY, #5**
 CITY-ST-ZIP **BOYNTON BEACH, FL 33425**

TITLE **DIRECTOR** ☐ Change ☒ Addition
 NAME **JOHN N. ROACH, JR.**
 STREET ADDRESS **16 OAKWOOD LANE**
 CITY-ST-ZIP **GREENWICH, CT 06830**

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 line empowered.

SIGNATURE:

DAVID MILLER, Chairman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/02 **561-558-0165**
 Date Daytime Phone #

CR2E034 (9/01)