

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002844

1. Entity Name

PREFERRED INTERNATIONAL DRIVE, INC.

**FILED**  
**Apr 25, 2001 8:00 am**  
**Secretary of State**

04-25-2001 90090 032 \*\*\*150.00

Principal Place of Business

6900 E 2ND ST  
SCOTTSDALE AZ 85251

Mailing Address

6900 E 2ND ST  
SCOTTSDALE AZ 85251

2. Principal Place of Business

209 PHIPPS PLAZA

3. Mailing Address

209 PHIPPS PLAZA

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM BEACH, FL

City & State

PALM BEACH, FL

Zip

33480

Country

USA

Zip

33480

Country

USA

4. FEI Number 93-1209223

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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, 2001 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 DP ☒ Delete  
NAME GROGAN, JAMES  
STREET ADDRESS 6900 E 2ND ST  
CITY-ST-ZIP SCOTTSDALE AZ 85251

TITLE VP ☒ Delete  
NAME TOUBMAN, ROBERT  
STREET ADDRESS 6900 E 2ND ST  
CITY-ST-ZIP SCOTTSDALE AZ 85251

TITLE VD ☒ Delete  
NAME KIRSCH, RANDALL  
STREET ADDRESS 6900 E 2ND ST  
CITY-ST-ZIP SCOTTSDALE AZ 85251

TITLE ST ☐ Delete  
NAME SHREEVE, DAVID  
STREET ADDRESS 6900 E 2ND ST  
CITY-ST-ZIP SCOTTSDALE AZ 85251

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 PRESIDENT, DIRECTOR ☐ Change ☒ Addition  
NAME A. DAVID KOSOV  
STREET ADDRESS 209 PHIPPS PLAZA  
CITY-ST-ZIP PALM BEACH, FL, 33480

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME BRIAN KOSOV  
STREET ADDRESS 209 PHIPPS PLAZA  
CITY-ST-ZIP PALM BEACH, FL, 33480

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

TITLE SECRETARY, TREASURER ☒ Change ☐ Addition  
NAME DAVID J. SHREEVE  
STREET ADDRESS 209 PHIPPS PLAZA  
CITY-ST-ZIP PALM BEACH, FL, 33480

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

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.

SIGNATURE: David J. Shreeve S/T David J. Shreeve 2/28/01 (561)835-1810  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)