

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90252 043 ***158.75

DOCUMENT # F97000003657

1. Entity Name

INDIANAPOLIS SECURITIES, INC.

Principal Place of Business

**2424 NORTH FEDERAL HWY
 BOCA RATON FL 33431**

Mailing Address

**2424 NORTH FEDERAL HWY
 BOCA RATON FL 33431**

2. Principal Place of Business

4729 N. Congress Ave.

3. Mailing Address

4729 N. Congress Ave.

City & State

Boynton Beach FL

City & State

Boynton Beach FL

Zip

33426

Country

USA

Zip

33426

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

35-1714403

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BERNARD, D A

**2424 NORTH FEDERAL HWY
 BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name

ANN GREENE

Street Address (P.O. Box Number is Not Acceptable)

4729 N. Congress Avenue

City

Boynton Beach FL

Zip Code

33426

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

Ann Greene

ANN GREENE - PRESIDENT

4/25/02

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 **PCD** ☒ Delete
 NAME **BERNARD, D A**
 STREET ADDRESS **234 PARK AVE**
 CITY-ST-ZIP **PALM BEACH FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 **P/D** ☒ Change ☐ Addition
 NAME **ANN GREENE**
 STREET ADDRESS **4729 N. Congress Avenue**
 CITY-ST-ZIP **Boynton Beach, FL 33436**

TITLE **S/T** ☐ Change ☒ Addition
 NAME **ARI DINO V**
 STREET ADDRESS **165 EAB Plaza Center W Tower 6th floor**
 CITY-ST-ZIP **Uniondale, NY 11556**

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

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

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:

Ann Greene

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

561-9666990

Daytime Phone #

CR2E034 (9/01)