

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90029 005 ***150.00

UNIFORM BUSINESS REPORT

DOCUMENT # F98000004812

1. Entity Name

MIG II REALTY ADVISORS, INC.

Principal Place of Business

**5025 SWETLAND COURT
CLEVELAND OH 44143**

Mailing Address

**5025 SWETLAND COURT
CLEVELAND OH 44143**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

5025 Swetland Court

Suite, Apt. #, etc.

Legal Dept.

City & State

Cleveland, Ohio

Zip

44143

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

34-1867964

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, 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	CD	<input type="checkbox"/> Delete
NAME	FRIEDMAN, JEFFREY L	
STREET ADDRESS	5025 SWETLAND COURT	
CITY-ST-ZIP	CLEVELAND OH 44143	
TITLE	VS	<input type="checkbox"/> Delete
NAME	LISHMEN, MARTIN A	
STREET ADDRESS	5025 SWETLAND COURT	
CITY-ST-ZIP	RICHMOND HTS OH 44143	
TITLE	VCFO	<input checked="" type="checkbox"/> Delete
NAME	FATICA, LOU	
STREET ADDRESS	5025 SWETLAND COURT	
CITY-ST-ZIP	CLEVELAND OH 44143	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HUGHES, WILLIAM T JR	
STREET ADDRESS	5025 SWETLAND COURT	
CITY-ST-ZIP	CLEVELAND OH 44143	
TITLE	P	<input type="checkbox"/> Delete
NAME	VOGT, LOUIS E	
STREET ADDRESS	5025 SWETLAND COURT	
CITY-ST-ZIP	RICHMOND HGTS OH 44143	
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	V/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (name correction)
NAME	Fishman, Martin A.	
STREET ADDRESS	5025 Swetland Court	
CITY-ST-ZIP	Richmond Heights, OH 44143	
TITLE	V/CFO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kathleen L. Alex	
STREET ADDRESS	5025 Swetland Court	
CITY-ST-ZIP	Richmond Heights, OH 44143	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

MARTIN A. FISHMAN

Martin A. Fishman, Vice President/Secretary

2/18/02

Date

216/797-8780

Daytime Phone #

CR2E034 (9/01)