08-31-2001 90003 042 **** 70.00

F98000006407

2001 UNIFORM BUSINESS REPORT (UBR)

ALGONA TO THE DESCRIPTION OF FICER OR DIRECTOR

DOCUMENT # F9800006407

1. Entity Name

SIGNATURE:

PEACE RESEARCH FOUNDATION, INC.

						. 01	SEP-7 PH	1:17	
Principal Plac	ce of Business	Mailing Address			-	nenguistav av STATE			
1350 E. SUNRISE BLVD STE 128 FORT LAUDERDALE FL 33304		1350 E. SUNRISE BLVD STE 128 FORT LAUDERDALE FL 33304			٠,	FAE	oretary of Bahassee.1	FEORIDA	,
								MOR BETTE BEKER BUSIK B	ION OF THE STATE
2. Principal P	lace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State				4. FEI Number 77-0374934 Applied For Not Applicable			
Zip .	Country	Zip	Zip Cou		5. Certificate of Status Desired		atus Desired · 🔣	\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		<u> </u>		7. Name and Addr	ess of New Register		
TCHIVIDJIAN, ANGHEL 1350 E. SUNRISE BLVD., SUITE 128				Name					
				Street Address (P.O. Box Number is Not Acceptable)					
FT. LAUD	ERDALE FL 33304						i	FL Zip Code	9
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									
	Signature, types or primes have at registered agent	and one is appricable. (140	- registere	O April Spik	ID 6 ISOTHER	W197 (188121212119)			
						\$5.00 May Be Added to Fees Make Check Payable to Department of State			
10.	OFFICERS AND DIF	RECTORS	11.			DDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS IN	10
TITLE	PCD	Delete	TITL			•		☐ Change	☐ Addition }
NAME STREET ADORESS	TCHIVIDJIAN, ANGHEL M 1350 E. SUNRISE BLVD #128		NAM STRE	et address	i				{}
CMY-ST-ZIP	FORT LAUDERDALE FL 33304			Y-SI-ZIP A.S.					
TITLE	ST PODOTHEN C	☐ Delete	TITL					☐ Change	☐ Addition
NAME Street address	VELA, DOROTHEA G 3250 PALM AIRE DR		NAM STRE	e Et address i			g., 		
CITY-ST-ZIP	N POMPANO BEACH FL 33069		•	-ST- ZIP)				
TITLE	D	☐ Delete	TITLE					☐ Change	☐ Addition
NAME	COLTMAN, HEATHER 5086 WASHINGTON RD		NAM		 	•			}
STREET ADDRESS CITY-ST-ZIP	DELRAY BEACH FL 33484			et address -st-zip					į
TITLE	D	59 Delete	TITLE		7			☐ Change	Addition
NAME	ERICKSON, BRUCE		NAM	Ē,	AH!	1AD, MALI. 15 South 1 TLANDEDA	Kadrow B		a
STREET ADDRESS CITY-ST-ZIP	3209 SERRA AVE. CARMEL CA 93923			ET ADORESS ST-ZIP	132 FOR	'S DOUTH!	N F F/ 33	ve, sure. Šir	9
TITLE	D D	☐ Defete	TITLE			27770-277	20,72	☐ Change	Addition
NAME	FRANCIS, KAY	CT Determ	NAM		Į			CI OFFICE	L. Addition
STREET ADDRESS	2699 STIRLING RD STE A105			ET ADDRESS					٠,
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		CUA	ST-ZIP					
TITLE	D HICKS, BASHA	☐ Delete	TITLE					Change	☐ Addition
NAME STREET ADDRESS	1121 CRANDON BLVD		, NAMI STRE	ET ADDRESS					į
CITY-ST-ZIP	KEY BISCAYNE FL 33149			ST-ZIP					ľ
12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.									