


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90147 020 ***158.75

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DOCUMENT # F98000006834	
1. Entity Name SREG BEACON TRADEPORT, INC.	

Principal Place of Business 4651 SHERIDAN ST. SUITE 200 HOLLYWOOD FL 33021	Mailing Address 4651 SHERIDAN ST. SUITE 200 HOLLYWOOD FL 33021
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0911752	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent STOTZER, THEODORE R 4651 SHERIDAN ST, SUITE 200 HOLLYWOOD FL 33021	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ **DATE** _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE DC NAME SWERDLOW, MICHAEL J STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE DC NAME SWERDLOW, MICHAEL J. STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE P NAME ZOHN, FRANK STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE P NAME ZOHN, FRANK STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VPS NAME STOTZER, THEODORE R STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE EVPS NAME STOTZER, THEODORE R. STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE EVP NAME ATZMON, SIDNEY STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE EVP NAME ATZMON, SIDNEY STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE EVP NAME DILL, BRETT STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE EVP NAME DILL, BRETT STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE EVP NAME LEBLANC, ROGER STREET ADDRESS 300 HOLLYWOOD WAY CITY-ST-ZIP HOLLYWOOD FL 33021	<input type="checkbox"/> Delete	TITLE EVP NAME LEBLANC, ROGER STREET ADDRESS 4651 SHERIDAN STREET, SUITE 200 CITY-ST-ZIP HOLLYWOOD, FLORIDA 33021	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, 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.

SREG BEACON TRADEPORT, INC.

SIGNATURE: By:  **March 20, 2003** (954) 981-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Theodore R. Stotzer, Executive Vice President

Date **Daytime Phone #**

CR2E034 (10/02)

Attachment

90073830



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 20, 2003

DALI ARTE Y PINTURA, INC.
10773 N.W. 58TH STREET
#396
MIAMI, FL 33178

SUBJECT: DALI ARTE Y PINTURA, INC.
Ref. Number: P02000042925

We have received your document for DALI ARTE Y PINTURA, INC. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please list the title(s) of each officer in your document.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Justin M Shivers
Document Specialist

Letter Number: 303A00017185