

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000006233

1. Entity Name

SUPERIOR GALLERIES, INC.

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90006 048 ***558.75

Principal Place of Business

9478 W. OLYMPIC BLVD.
BEVERLY HILLS CA 90212

Mailing Address

9478 W. OLYMPIC BLVD.
BEVERLY HILLS CA 90212

2. Principal Place of Business

9478 W. OLYMPIC BLVD.

3. Mailing Address

9478 W. OLYMPIC BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
BEVERLY HILLS, CA

City & State
BEVERLY HILLS, CA

4. FEI Number 95-4495971

Applied For

Not Applicable

Zip
90212

Country
LOS ANGELES

Zip
90212

Country
LOS ANGELES

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT 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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
C
MARKOFF, STEVEN C
100 WILSHIRE BLVD., 3RD FL
SANTA MONICA CA 90401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
PARKER, LISA
9478 W. OLYMPIC BLVD.
BEVERLY HILLS CA 90212 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
KONO, SUSAN
12976 SHORT AVE.
LOS ANGELES CA 90066 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
OZAKI, JOSEPH
100 WILSHIRE BLVD., 3RD FLOOR
SANTA MONICA CA 90401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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

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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISA PARKER / PRESIDENT

Date

Daytime Phone #

7/19/00

(310) 203-9855