

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 31, 2002 8:00 am
Secretary of State

07-31-2002 90094 045 ***150.00

DOCUMENT # G12041

1. Entity Name

TIME PROPERTIES, INC.

Principal Place of Business

~~9889 SW 72 ST.~~

~~MIAMI FL 33173~~

Mailing Address

~~9889 SW 72 ST.~~

~~MIAMI FL 33173~~

2. Principal Place of Business

4140 BATTERSEA ROAD

3. Mailing Address

4140 BATTERSEA ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

COCONUT GROVE, FL

City & State

COCONUT GROVE, FL

Zip

33133

Country

DADE

Zip

33133

Country

DADE

4. FEI Number

59-2244417

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COHEN, MURRY

9889 SW 72 ST.

MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

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

4140 BATTERSEA ROAD

City

COCONUT GROVE

FL

Zip Code

33133

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

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, 2002 Fee 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	PV	<input type="checkbox"/> Delete
NAME	COHEN, MURRY	
STREET ADDRESS	9889 SW 72 ST.	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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	4140 BATTERSEA ROAD	
CITY-ST-ZIP	COCONUT GROVE, FL 33133	
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		
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:

SIGNATURE REQUIRED

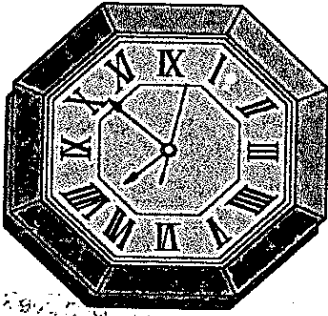
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/29/02 **305-740-6765**

Date

Daytime Phone #

CR2E034 (4/02)



Attachment
TIME PROPERTIES, INC., REALTORS
4140 BATTERSEA ROAD
COCONUT GROVE, FLORIDA 33133
(305) -740-6765

7/29/02

312041

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
PO BOX 1500
TALLAHASSEE, FL 32302

SIRS

**PLEASE BE ADVISED THAT WE CHANGED OUR ADDRESS AND DID NOT
RECEIVE THE ORIGINAL REPORT WHICH WE HAVE FOR 22 YEARS
SENT IN PRIOR TO THE NECESSARY DATE. PLEASE ABATE THE
PENALTY FOR REASONABLE CAUSE. IN ADDITION TO THIS
PLEASE CHANGE OUR ADDRESS AS THE FORM ENCLOSED SO WE
MAY RECEIVE OUR REPORT ON TIME NEXT YEAR.**

THANK YOU


MURRY COHEN PRESIDENT