2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G45691 1. Entity Name DADELAND SQUARE, INC.						Secretary of State 04-28-2002 90777 009 ***150.00					
Principal Plac 9155 SOUTH MIAMI FL 331 US	DADELAND BLVD., STE. 1812	Mailing Address 9155 SOUTH DADELAND BLVD STE. 1812 MIAMI FL 33156 US									
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
										City & State	
Zip Country		Zip		Country		Certificate of	Status Desired		8.75 Add	litional	1
	6. Name and Address of Curren	t Registered Agent	<u> </u>	T	7. N	lame and A	ddress of New Re			-	1
GREEN S	ELIZABETH A., ESQ.		Name								
· ·	(ENDALL-DR-			Street Address	s (P.O. B	lox Number i	s Not Acceptable)	(BI)	id.		
- STE-200			_			aciano		<u> </u>		1	
MIAMI FL 33156				Suite City	181	سر			Zip Çode	9	\mathbf{I}
mir drin 1 E 90 100				Oity				FL			1
Tax filing i	Signaturic typed or printed ame of registered agest or action is eligible to satisfy its Intangib requirement and elects to do so. ria on back)	le FILE NO After May 1,	W!!! FEE 2002 Fee	ed Agent signature required IS \$150.00 will be \$550.00 epartment of S)	10. Electi	ion Campaign Fina			0 May Be to Fees	1
11.	OFFICERS ANI	D DIRECTORS	12.		AD	DITIONS/CI	HANGES TO OFFIC	CERS AND D	RECTOR	3 IN 11	1.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, HERSCHEL V 9155 SOUTH DADELAND BLVD MIAMI FL 33156	□ Delete D., STE. 1812		l l				[Change	☐ Addition	10000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GREEN, ELIZABETH A. 9155 SOUTH DADELAND BLVD MIAMI FL 33156	☐ Delete D., STE. 1812						` [Change	Addition] {
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, GEORGE R., JR. 9155 SOUTH DADELAND BLVD MIAMI FL 33156	☐ Delete D., STE. 1812						[Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HORTON, RICHARD M 9155 SOUTH DADELAND BLVD MIAMI FL 33156	☐ Delete D., STE. 1812						[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GRAD, SUSAN A 9155 SOUTH DADELAND BLVD MIAMI FL 33156	☐ Delete D., STE. 1812						[Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						[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 plactoress, with all other like empowered.