

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G 57145

1. Entity Name

SHORE-LINE CARPET SUPPLIES OF PALM BEACH, INC.

Principal Place of Business

5741 DEWEY STREET  
HOLLYWOOD, FL 33023-8973

Mailing Address

5741 DEWEY STREET  
HOLLYWOOD, FL 33023-8973

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2322390

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAWRENCE LERNER  
5741 DEWEY STREET  
HOLLYWOOD, FL 33023

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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 P/S/D/C  
NAME Lawrence Lerner  
STREET ADDRESS 5741 Dewey Street  
CITY-ST-ZIP Hollywood, FL 33023-8973

TITLE D  
NAME MORION HERLMAN  
STREET ADDRESS 7360 S.W. 16 Street  
CITY-ST-ZIP Plantation, FL 33317

TITLE D  
NAME STEVEN HART  
STREET ADDRESS 14851 Wind River Drive  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE VP/AS/T/D  
NAME MARC S. LERNER  
STREET ADDRESS 5741 Dewey Street  
CITY-ST-ZIP Hollywood, FL 33023-8973

TITLE D  
NAME BRIAN LERNER  
STREET ADDRESS 5741 Dewey Street  
CITY-ST-ZIP Hollywood, FL 33023-8973

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
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.

LAWRENCE LERNER, Pres., Sec'y and Director

SIGNATURE:

*Lawrence Lerner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 2, 2001

Date

2

, 2001

(954) 962-8666

Daytime Phone #

FILED

01 MAR -2 PM 3:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)