2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H82081 1. Entity Name BERMA DEVELOPMENT CORPORATION							FILED 02 APR 18 AM 9:08					
Principal Place 3225 AVIATION MIAMI FL 33 63	AVE 4TH FL	DOR	Mailing Address 3225 AVIATION AVE 4TH FLOOR MIAMI FL 38133			SECRETARY OF STATE TALLAHASSEE, FLORIDA						
, .												
2. Principal Pla	IANI	a Pla	20	'			Bil BiBil Asbil an					
Suite, Apt. #	, étc.	na react	Suite, Apt. #, etc. SU/TE 4400					DO NOT WRIT	E IN THIS S	PACE		
Suite City & State	_		City & State				4. FEIN	Jumber 59-2593426		_ 	olied For	
NEW)	YOEK 1	Country	Zip Country				Corrificate of Status Desired \$8.75 Additional					
10119. 6. Name and Address of Current R			10/19. egistered Agent				7. Name and Address of New Registered Agent					
						Name						
NATIONAL CORPORATE RESEARCH LTD 1406 HAYS STREET					Street Address (P.O. Box Number is Not Acceptable)							
SUITE 2					City			·		-1 -: 		
TALLAHASSEE FL 32301									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 o	r printed name of registered agent ar	nd title if applicable. (NOTI	E: Registere	d Agent signatu	re required	All Marian - washing the water of	-05/02/	0201	=		
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE						ad all of . Manual of the o	4 9 95	0. Election Campaign Fir			May Be	
Tax filing requirement and elects to do so. (See criteria on back) After May 1, 2002 Make Check Payable								Trust Fund Contributio			to Fees	
11.		OFFICERS AND I		12.			1	ONS/CHANGES TO OFF	ICERS AND			
	DP Delete III MORTON, THOMAS A R					Molton, Thomas OR						
STREET ADDRESS		tion ave., 4th floof	1		EET ADDRESS '- ST-ZIP	6990	o NW	97AVENUE EL 33178				
	TRD		☐ Delete	TITL						Change	Addition	
	MURPHY, 3225 AVIA	Thomas Tion ave., 4th floof	₹	NAM STR	ie Eet address	ADDRESS ONE PENNSYLVANIA PLAZA						
CITY-ST-ZIP	MIAMI FL:				r-ST-ZiP	NEI	W YOL	CK, NY 10119		Change	☐ Addition	
NAME	S SKOPP, FI		☐ Delete	TITL NAM		5Ko	PP, F	re ORIC M. 97 QUENUE		A change		
STREET ADDRESS CITY-ST-ZIP	3225 AVIATION AVE., 4TH FLOOR STILL					Ma	mi, t	EL 33178.				
TITLE	AS		☐ Delete	TITL		Cos	V0E (CRISTINA 1 82 AULANG 5 FL 33166		Change	Addition	
STREET ADDRESS		tion ave., 4th floof	?	STR	EET ADDRESS	378.	5 DU	82 Queruf 3	78 417	7	•	
CITY-ST-ZIP TITLE	MIAMI FL:	33133		TITL	/-ST-ZIP .E	. , , ,	4111/	C 33/66	<u>.</u>	☐ Change	Addition	
NAME STREET ADDRESS				NAN STR	ME EET ADDRESS		\	1 1/26			-	
CITY-ST-ZIP		·			r-ST-ZIP		(Punh				
TITLE NAME			☐ Delete	TITL			`	7		Change	Addition	
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS Y-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: CRISTINA CONDE, REQUISITED Quele 02-15-02 (305) 418-3185												
		OWNATURE AND TYPED ON P	THE PRAME OF SIGNING OFFICER	JA JINEL				2000	_			