## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **H92884**

## FILED May 14, 2001 8:00 am

1. Entity Name  DIRECT MANAGEMENT, INC.					Secretary of State 05-14-2001 90044 008 ***150.00				
Principal Place of Business 5675 SW 35TH AVENUE HOLLYWOOD FL 33312 US		Mailing Address 5675 SW 35TH AVENUE HOLLYWOOD FL 33312 US			-	- ·- · · · · · · · · · · · · · · · · ·	,		
2. Principal Place of Business 3301 W BRITTING RD Suite, Apt. #, etc.		3. Mailing Address 320/ W 61.74 N Rd  Suite, Apt. #, etc. 106		ld	DO NOT WRITE IN THIS SPACE				
106 City & State DANIA BEACH, F1		City & State BEACH, Fl		/ 4	J. FEI Number 59-26384	Applied For Not Applied			7
33312	Country.	Zin 333/2	Country U S	\$ 5	i. Certificate of Status Desired		.75 Add Required	litional	
	6. Name and Address of Current KELBAUM, GORDON	Registered Agent	Name Street A	ECKElb	Name and Address of New	J			
	SW 35TH AVENUE LYWOOD FL 33312				P. Box Number is Net Accepte  O . B. F. F. F. 1/10  L. F. F. F. 1/10	106 H			
8. The above	named entity submits this statement for	the purpose of changing its	registered office o		Beach agent, or both, in the State of	FL Florida.	Zip Code	312	
SIGNATURE	Signature; type <del>d or printed</del> name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signa	ture required whe	n reinstating)	DATE			
Tax filing requirement and elects to do so. After MAY 1, 2001			FEE IS \$150.00 Fee will be \$550.00 to Department of State		10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				}
11.	OFFICERS AND I	DIRECTORS	12.		ADDITIONS/CHANGES TO O		,	IN 11	]_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DECKELBAUM, GORDON 5675 SW 35TH AVENUE HOLLYWOOD FL 33312	☐ Delete	TITLE NAME STREET ADDRESS - CITY-ST-ZIP	Deckeld 3201 DAM	baum, bordono w briffing Rd was Beach Fl	*106 33312	Change	☐ Addition	CR2E034 (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	CR2
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP			_ []	Change	Addition	-
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13. I hereby of indicated	certify that the information supplied with a on this report or supplemental report is	his filing does not qualify for true and accurate and that my	he exemption stat signature shall h	ted in Section	n 119.07(3)(i), Florida Statute e legal effect as if made unde	s. I further certify t er oath; that I am a	nat the inf	iormation or director	