

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State

05-24-2001 90001 043 ***150.00

DOCUMENT # J88287

1. Entity Name

CENMARK REALTY SERVICES, INC.

Principal Place of Business

**10109 CLEARY BLVD
 PLANTATION FL 33324**

**8360 W. OAKLAND PK. BLVD.
 STE 304
 SUNRISE, FL 33351**

Mailing Address

10109 CLEARY BLVD

PLANTATION FL 33324-1061

**8360 W. OAKLAND PK. BLVD.
 STE 304
 SUNRISE, FL 33351**

2. Principal Place of Business

8360 W. OAKLAND PK BL

SUITE 300

SUNRISE, FL

Zip 33351

Country

3. Mailing Address

8360 W. OAKLAND PK BLVD

SUITE 300

SUNRISE, FL

Zip 33351

Country

4. FEI Number

59-2837925

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

WINFIELD, MARIANNE

16632 SADDLE CLUB ROAD 8360 W. OAKLAND PK. BLVD

FT. LAUDERDALE FL 33328 STE 300

SUNRISE, FL 33351

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, 2000, 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 **DP** ☐ Delete
 NAME **WINFIELD, MARIANNE**
 STREET ADDRESS **16632 SADDLE CLUB RD. 8360 W. OAKLAND**
 CITY-ST-ZIP **FT. LAUDERDALE FL Sunrise Fl Ste 300 33351**

TITLE **DS** ☐ Delete
 NAME **RYCZEK, ROBERT L.**
 STREET ADDRESS **16632 SADDLE CLUB RD. 8360 W. OAKLAND**
 CITY-ST-ZIP **FT. LAUDERDALE FL Sunrise Fl 33351**

TITLE **DVP** ☒ Delete
 NAME **MORR, DAN**
 STREET ADDRESS **16632 SADDLE CLUB RD**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME **POE B Ltd**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME **PK Blvd**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ Change ☐ 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 400, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ROBERT L. RYCZEK

4-12-00

(954) 423 2117

CR2E034 (9/99)