

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K01122

1. Entity Name

PRINCETON INDUSTRIES, INC.

Principal Place of Business

12550 NW 39TH STREET  
CORAL SPRINGS FL 33065  
US

Mailing Address

12550 NW 39TH STREET  
CORAL SPRINGS FL 33065  
US

2. Principal Place of Business

6001 Powerline Rd.

3. Mailing Address

6001 Powerline Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33309

Country

USA

Zip

33309

Country

USA

6. Name and Address of Current Registered Agent

BREWSTER, BRAD  
12550 NW 39TH STREET  
CORAL SPRINGS FL 33065

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 PD  
NAME BREWSTER, BRADLEY W  
STREET ADDRESS 4908 NW 101 AVE  
CITY-ST-ZIP CORAL SPRINGS FL 33076 ☐ Delete

TITLE TD  
NAME BREWSTER, BRENT D  
STREET ADDRESS 4908 NW 101 AVE  
CITY-ST-ZIP CORAL SPRINGS FL ☐ Delete

TITLE VPD  
NAME KAYE, MARC B  
STREET ADDRESS 11261 LAKEVIEW DR  
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Delete

TITLE S  
NAME KAYE, SUE L  
STREET ADDRESS 11261 LAKEVIEW DR  
CITY-ST-ZIP CORAL SPRINGS FL 33071 ☒ Delete

TITLE VP  
NAME ORTIZ, EDUARDO  
STREET ADDRESS 4985 NW 82 WD TERR  
CITY-ST-ZIP FORT LAUDERDALE FL 33351 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE VP-S-D  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Apr 10, 2001 8:00 am  
Secretary of State

04-10-2001 90041 013 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)