

DOCUMENT # K31171

1. Entity Name

FT LIQUIDATING CORP.

Principal Place of Business

Mailing Address

7630 N.W. 25TH STREET
MIAMI FL 33122
US

7630 N.W. 25TH STREET
MIAMI FL 33122-1705
US

2. Principal Place of Business

1200 BRICKELL AVE. 1200 BRICKELL AVE

Suite, Apt. #, etc.

2015

3. Mailing Address

Suite, Apt. #, etc.

2015

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33131

Country

DADE

Zip

33131

Country

DADE

4. FEI Number

65-0101406

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEGAL ASSETS INC
7630 N.W. 25TH STREET
MIAMI FL 33122

7. Name and Address of New Registered Agent

Name

LEONARD J. KELLER

Street Address (P.O. Box Number is Not Acceptable)

1200 BRICKELL AVE STE. 2015

City

MIAMI,

FL

Zip Code

33131

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 LEONARD J. KELLER

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-4-2000

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 ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
DPST
KELLER, LEONARD J.
7630 N.W. 25TH STREET
MIAMI FL 33122

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP
CLO
FUERST, MITCHELL S
7630 N.W. 25TH STREET
MIAMI FL 33122

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

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
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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)(l), 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: LEONARD J. KELLER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-2000 305 350 5698

Date

Daytime Phone #

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90096 013 ***158.75



DO NOT WRITE IN THIS SPACE