

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90062 029 ***550.00

DOCUMENT # K39373

1. Entity Name
YALE PROPERTIES TWO, INC.

Principal Place of Business

3201 W GRIFFIN RD
100 X
DANIA BEACH FL 33312
US

Mailing Address

3201 W GRIFFIN RD
100 X
DANIA BEACH FL 33312
US

2. Principal Place of Business

Suite, Apt. #, etc.

106

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

106

City & State

Zip

Country

4. FEI Number **65-0078322**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

DECKELBAUM, GORDON
3201 W GRIFFIN RD
#100 X
DANIA BEACH FL 33312

7. Name and Address of New Registered Agent

Name

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

106

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 **DVP** ☐ Delete
 NAME **RICHTER, SAM**
 STREET ADDRESS **3201 W GRIFFIN RD #106**
 CITY-ST-ZIP **DANIA BEACH FL 33312**

TITLE **DP** ☐ Delete
 NAME **RICHTER, MORRIS**
 STREET ADDRESS **3201 W GRIFFIN RD #106**
 CITY-ST-ZIP **DANIA BEACH FL 33312**

TITLE **DSV** ☐ Delete
 NAME **DECKELBAUM, GORDON**
 STREET ADDRESS **3201 W GRIFFIN RD #106**
 CITY-ST-ZIP **DANIA BEACH FL 33312**

TITLE ☐ Delete
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 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

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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 REQUIRED *Gordon Deckelbaum*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-965-3636

CR2E034 (4/02)