

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 06, 2001 08:00 AM**
Secretary of State**DOCUMENT # K52360**1. Entity Name
EAST FAIRVIEW, INC.**Principal Place of Business**

100 XANADU PL

JUPITER
33477

US

FL

Mailing Address

100 XANADU PLACE

JUPITER
33477

US

FL

2. Principal Place of Business

104 SEA OATS DRIVE

Suite, Apt. #, etc.
APT. #FCity & State
JUNO BEACH

FL

Zip
33408Country
US**3. Mailing Address**

104 SEA OATS DRIVE

Suite, Apt. #, etc.
APT. #FCity & State
JUNO BEACH

FL

Zip
33408Country
US**4. FEI Number**

65-0093750

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentPERITZ, STEPHEN
100 XANADU PLACEJUPITER
33477

US

FL

7. Name and Address of New Registered Agent**Name**

PERITZ, STEPHEN

Street Address (P.O. Box Number is Not Acceptable)
104 SEA OATS DRIVECity
JUNO BEACH

FL

Zip Code
33408

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 _____ **04/06/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	<input type="checkbox"/> Delete
NAME	PERITZ, VICTORIA	
STREET ADDRESS	100 XANADU PLACE	
CITY-ST-ZIP	JUPITER	FL
TITLE	D	<input type="checkbox"/> Delete
NAME	PERITZ, STEPHEN	
STREET ADDRESS	100 XANADU PL	
CITY-ST-ZIP	JUPITER	FL
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERITZ, VICTORIA	
STREET ADDRESS	100 XANADU PLACE	
CITY-ST-ZIP	JUPITER	FL 33477
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERITZ, STEPHEN	
STREET ADDRESS	104 SEA OATS DRIVE, APT. #F	
CITY-ST-ZIP	JUNO BEACH	FL 33408
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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: Stephen Peritz

VP

04/06/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)