

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L29977

1. Entity Name  
CEDARS EAST FINANCIAL CORPORATION

**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90015 024 \*\*\*150.00

Principal Place of Business  
1717 N BAYSHORE DR  
SUITE 4032  
MIAMI FL 33132  
US

Mailing Address  
1717 N BAYSHORE DR  
SUITE 4032  
MIAMI FL 33132  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0172158		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State					
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
HEAFEY, NATHALIE 1717 N BAYSHORE DR #4032 MIAMI FL 33132				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City		FL	

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 \_\_\_\_\_ (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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$550.00</b> <b>After SEPTEMBER 13, 2000 Min. will be \$750.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANOUE, DENIS 372 AVE. PRINCIPALE #103 QUEBEC, CANADA <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS LANOUE, DENIS 372 AVE. PRINCIPALE #103 GATINEAU, QUEBEC, CD. <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BEATTIE, LYNN 372 AVE. PRINCIPALE #103 GATINEAU QUEBEC, CD. <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HEAFEY, NATHALIE 372 AVE. PRINCIPALE #103 GATINEAU QUEBEC, CD. <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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] 7/26/00 (305) 530-0609  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

Attachment  
DA 429977  
DW7700

***Cedars East Financial Corporation***  
1717 N. Bayshore Dr., #4032  
Miami, FL 33132

Department of State  
Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: 2000 Uniform Business Report.

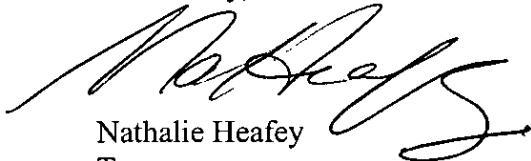
To Whom It May Concern:

As discussed with one of your agent this letter is to advise you that the first notice for our 2000 report was never received. The second notice was received on July 25, 2000 at the above-mentioned address.

Enclosed you will find a check in the amount of \$150.00 for filing fee as we would like to have the \$400.00 late fee waived.

Trusting the above is to your satisfaction.

Yours truly,



Nathalie Heafey  
Treasurer