

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L40156

1. Entity Name

BOYNTON PLAZA SHOPPING CENTER, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 90041 024 ***150.00

Principal Place of Business

2401 PGA BLVD
SUITE 280
PALM BEACH GARDENS FL 33410
US

Mailing Address

2401 PGA BLVD
SUITE 280
PALM BEACH GARDENS FL 33410
US

2. Principal Place of Business

1696 NE Miami Gardens Drive

3. Mailing Address

1696 NE Miami Gardens Drive

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

City & State

North Miami Beach, Florida

City & State

North Miami Beach, Florida

4. FEI Number

65-0172551

Applied For

Not Applicable

Zip
33179

Country

USA

Zip
33179

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WIENER, DAVID J.
2401 PGA BOULEVARD
SUITE 280
PALM BEACH GARDENS FL 33410

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Delete
NAME PRESTON, JOHN W.S.
STREET ADDRESS 2401 PGA BLVD
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE DPAS ☐ Change ☒ Addition
NAME Katzman, Chaim
STREET ADDRESS 1696 NE Miami Gardens Drive, Suite 200
CITY-ST-ZIP North Miami Beach, Florida 33179

TITLE DV ☒ Delete
NAME COHEN, PETER F.
STREET ADDRESS % 2851 JOHN ST. #1
CITY-ST-ZIP MARKHAM, ONT. CAN

TITLE DVS ☐ Change ☒ Addition
NAME Valero, Doron
STREET ADDRESS 1696 NE Miami Gardens Drive, Suite 200
CITY-ST-ZIP North Miami Beach, Florida 33179

TITLE S ☒ Delete
NAME GREEN, ROBERT
STREET ADDRESS % 2851 JOHN ST. #1
CITY-ST-ZIP MARKHAM, ONT. CAN

TITLE DVT ☐ Change ☒ Addition
NAME Segal, Dori
STREET ADDRESS 161 Bay Street, Suite 2820
CITY-ST-ZIP Toronto, ON M5J 2S1 Canada

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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)(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.

Boynton Plaza Shopping Center, Inc.

SIGNATURE:

By:

305-947-1664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)