

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L44815

1. Entity Name

THE BLUFFS SHOPPING CENTER CORPORATION

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90249 046 ***150.00

A0065955

DO NOT WRITE IN THIS SPACE

Principal Place of Business
2401 PGA Boulevard
Suite 280
Palm Beach Gardens, FL
33410

Mailing Address
2401 PGA Boulevard
Suite 280
Palm Beach Gardens, FL
33410

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

Zip
33179

Country
USA

Zip
33179

Country
USA

4. FEI Number
65-0172554

Applied For
Not Applicable

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. ESQ.
2401 PGA Boulevard, Suite 280
Palm Beach Gardens, Florida 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
NAME
STREET ADDRESS
CITY-ST-ZIP

DP
Preston, John W.S.
2401 PGA Boulevard, Suite 280
Palm Beach Gardens, FL 33410

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DPAS
Katzman, Chaim
1696 NE Miami Gardens Drive, Suite 200
North Miami Beach, Florida 33179

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VST
Green, Robert S.
2851 John Street, Suite One
Markham, Ontario L3R5R7 Canada

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DVS
Valero, Doron
1696 NE Miami Gardens Drive, Suite 200
North Miami Beach, Florida 33179

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DVAS
Bernick, Larry
2401 PGA Boulevard, Suite 280
Palm Beach Gardens, FL 33410

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DVT
Segal, Dori
161 Bay Street, Suite 2820
Toronto, ON M5J 2S1 Canada

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
Cohen, Peter F.
30 St. Clair Avenue West, Suite 1400
Toronto, Ontario M43VA1 Canada

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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.

The Bluffs Shopping Center Corporation

SIGNATURE: By:

305-947-1664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #