FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

## Mar 13, 2001 8:00 am **DOCUMENT # L71631** Secretary of State 1. Entity Name FORSTER, SPENCER AND EISEN, INC. 03-13-2001 90313 020 \*\*\*150.00 Principal Place of Business Mailing Address 15050 NW 79TH CT. 15050 NW 79TH CT. #201 #201 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0196800 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FINAN, MARY W. Street Address (P.O. Box Number is Not Acceptable) 15050 NW 79TH CT. MIAMI LAKES FL 33016 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition TITLE Change ☐ Delete TITLE NAME FORSTER, LOUIS L. NAME STREET ADDRESS STREET ADDRESS 15320 SW 77TH AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Delete XX Change ☐ Addition TITLE TITLE NAME SPENCER, GEOFFREY C. NAME STREET ADDRESS STREET ADDRESS 3046 Orange Street 4901 PARK AVE. CITY-ST-7IP CITY-ST-ZIP **COCONUT GROVE FL 33133** Delete ☐ Addition TITLE JITLE ☐ Change NAME NAME EISEN, JEFFREY, L STREET ADDRESS STREET ADDRESS 1220 WILSHIRE CIR W CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33027 ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME FINAN, MARY, W STREET ADDRESS STREET ADDRESS 8403 REDNOCK LANE CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES FL ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

Jeffrey L.

L. Disen, Vice President Vue, Pus,

3/6/2001

305-821-9500

Daytime Phone #

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