

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L73691

1. Entity Name

NEW BEACH REALTY, INC.

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90148 021 ***150.00

Principal Place of Business

169 LINCOLN RD
SUITE 318
MIAMI BEACH FL 33139-2029
US

Mailing Address

169 LINCOLN RD
SUITE 318
MIAMI BEACH FL 33140-1337
US

2. Principal Place of Business

2901 Collins Ave

Suite, Apt. #, etc.

Lower Lobby

City & State

Miami Beach, FL

Zip

33140

Country

Dade

3. Mailing Address

P.O. Box 403337

Suite, Apt. #, etc.

City & State

Miami Beach, FL

Zip

33140-1337

Country

Dade



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0195425

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAZAR, BRUCE E., ESQ.
2901 COLLINS AVE
M
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

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, 2000 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

TITLE P
NAME COONEY, THOMAS G ☐ Delete
STREET ADDRESS 169 LINCOLN RD / STE - 318
CITY-ST-ZIP MIAMI FL

TITLE S
NAME COONEY, LORI ☐ Delete
STREET ADDRESS 169 LINCOLN RD. 1 STE 318
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Add
NAME
STREET ADDRESS P.O. Box 403337
CITY-ST-ZIP Miami Beach, FL 33140-1337

TITLE ☒ Change ☐ Add
NAME
STREET ADDRESS P.O.Box 403337
CITY-ST-ZIP Miami Beach, FL 33140-1337

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

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

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

TITLE ☐ Change ☐ Add
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JOHN W. COONEY

Date

Daytime Phone #