

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L94403

Entity Name

INLAND PROPERTIES, INC.

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90066 023 ***150.00

Principal Place of Business

2 N.E. 3RD AVE
LAUDERDALE FL 33301

Mailing Address

432 N.E. 3RD AVE
FT. LAUDERDALE FL 33301-3234

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0220476

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAYIA, EDWARD, JR.
432 N.E. 3RD AVE
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

LE ME REET ADDRESS Y-ST-ZIP	D CAYIA, EDWARD, JR. 432 N.E. 3RD AVE FT. LAUDERDALE FL	<input type="checkbox"/> Delete
LE ME REET ADDRESS Y-ST-ZIP		<input type="checkbox"/> Delete
LE ME REET ADDRESS Y-ST-ZIP		<input type="checkbox"/> Delete
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LE ME REET ADDRESS Y-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWARD de R. CAYIA, JR.

Date

3/24/00

Daytime Phone #

954/765-1400

CR2E034 (9/99)