

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90004 007 ***150.00

DOCUMENT # M88792

1. Entity Name
ALLIANCE MONUMENT COMPANY

Principal Place of Business

**5825 PLUNKETT ST.
 HOLLYWOOD FL 33023
 US**

Mailing Address

**5825 PLUNKETT ST.
 HOLLYWOOD FL 33023
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0116389**

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

**BARANY, SANDOR JR
 5825 PLUNKETT ST
 HOLLYWOOD FL 33023**

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

Sandor Barany

1-6-02

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, 2002 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	P	<input type="checkbox"/> Delete
NAME	BARANY, SANDOR JR	
STREET ADDRESS	18200 SW 68TH COURT	
CITY-ST-ZIP	SOUTHWEST FL 33331	
TITLE	V	<input type="checkbox"/> Delete
NAME	BARANY, TIM	
STREET ADDRESS	5651 SW 55 ST	
CITY-ST-ZIP	DAVIE, FLA 33314	
TITLE	S	<input type="checkbox"/> Delete
NAME	BARANY, JANICE	
STREET ADDRESS	18200 SW 68TH COURT	
CITY-ST-ZIP	SOUTHWEST FL 33331	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARANY, TOM	
STREET ADDRESS	5740 SW 54 CT	
CITY-ST-ZIP	HOLLYWOOD FL DAVIE, FLA 33314	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE:

Sandor Barany

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-6-02

Date

954 966 8415

Daytime Phone #

CR2E034 (9/01)