

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N33729

1. Entity Name

FRANZBLAU MEMORIAL HOME, INC.

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90021 012 ****70.00

Principal Place of Business

%AINSLIE R. FERDIE
717 PONCE DE LEON BLVD #215
CORAL GABLES FL 33134

Mailing Address

%AINSLIE R. FERDIE
717 PONCE DE LEON BLVD #215
CORAL GABLES FL 33134

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

65-0144660

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERDIE, AINSLEE R
717 PONCE DE LEON BLVD #215
CORAL GABLES FL 33134

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

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
TYLER, EDGAR
901 COLLONY PT CIR #416
PEMBROKE PINES FL 33026 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
ZABACK, EDWARD
301 SW 135TH AVE #C301
PEMBROKE PINES FL 33027 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
TURK, MAX
13550 SW 6TH CT #A312
PEMBROKE PINES FL 33027 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
EDWARD ZABACK
301 SW 135 AVE #C-301
PEMBROKE PINES, FL 33027-1633 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
MAX TURK
13550 SW 6TH CT #A312
PEMBROKE PINES, FL 33027 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BERNARD FEILER
13450 SW 3 ST. #D-118
PEMBROKE PINES, FL 33027 ☐ Change ☒ Addition

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

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

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/19/00 954-435-3184

CR2E037 (5/00)