## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N97000002567

1. Entity Name

LOCAL 780 I.A.T.S.E., INC. LAND CORPORATION

125 NORTH BREVARD AVENUE 125				Mailing Address 25 North Brevard Avenue OCOA BEACH FL 32931						
Principal Place of Business     3. M.				Mailing Address						
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State			City	City & State			4. FEI Number 36-2028354 Applied For			
Zip Country			Zip	Zip Co		<u> </u>	5. Certificate of S	Status Desired	¢0.75 .	
	6. Name	and Address of Current I	. I	l LAgent			7 Name and Ad	dress of New Registe	•	<del>2</del> 0
·				- Agom	Na	ıme	7. Name and Ad	ruress of New Hegiste	rea Agent	
YOUNGER, ANDREW 3950 S. BANANA RIVER BLVD. COCOA BEACH FL 32931				سـ ۳ ي . سحر	Str	Street Address (P.O. Box Number is Not Acceptable)				
	00101112	52001			Cit	у	<del></del>		FL Zip Coo	le .
9 The show	a named antih	and the state of t	.,	<del></del>						
the obligations		/ submits this statement for ered agent. or printed name of registered agent a								and accept
	orginature, typou	or busined rightle of legistered agent a	по ше парряс	able. (NOTE:	: Hegistered Agen	signature require	ed when reinstating)	DA	JE	
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State			
10.	156	OFFICERS AND DIR	ECTORS		11.		ADDITIONS/CHANG	SES TO OFFICERS AND	DIRECTORS IN	110
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COCOA BE	, andrew Wana River Blvd. Each fl 32931		□ Delete	TITLE NAME STREET ADDI CITY-ST-ZIF				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BERKOWIT 111 W. JAC CHICAGO	CKSON BLVD.		□ Delete	TITLE NAME STREET ADDA CITY-ST-ZIP		1. 2. No.		€ Change	☐ Addition
TITLE NAME **STREET ADDRESS* CITY-ST-ZIP	TD TIBERI, BO 30 N LASA CHICAGO	LLE STREET SUITE 420	)O *	☐ Delete	TITLE NAME STREET ADDR			<u>.</u>	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICACO	L 00004		☐ Delete	TITLE NAME STREET ADDR	ESS 1			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	☐ Delete	TITLE NAME STREET ADDR	ESS ·		i.	☐ Change	Addition
TITLE NAME STREET ADDRESS				☐ Delete	TITLE NAME	-00			☐ Change	Addition

12. I hereby certify that the information supplied with this filling 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

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

13 Jan 03 (32)784-03)

**FILED** 

Jan 17, 2003 8:00 am Secretary of State

01-17-2003 90044 004 \*\*\*\*61.25