

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000001408

1. Entity Name

SUCCESS HOMES REALTY, INC.

Principal Place of Business

120 E. OAKLAND PARK BLVD., SUITE 105
FT. LAUDERDALE FL 33334

Mailing Address

120 E. OAKLAND PARK BLVD., SUITE 105
FT. LAUDERDALE FL 33334

2. Principal Place of Business

2880 W. Oakland Pk Blvd

3. Mailing Address

2880 W. Oakland Pk Blvd

Suite, Apt. #, etc.

125D

Suite, Apt. #, etc.

125D

City & State

FT. Lauderdale

City & State

FT. Lauderdale

Zip

33311

Country

U.S.A.

Zip

33311

Country

U.S.A.

6. Name and Address of Current Registered Agent

VILLIERS, MARCIA V
7706 S.W. 7TH COURT
N. LAUDERDALE FL 33068

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 NAME STREET ADDRESS CITY-ST-ZIP
President MARCIA Villiers 7706 SW 7th Ct N. Lauderdale FL 33068

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCIA Villiers

4/20/00 (954) 9593

FILED
Jun 05, 2000 8:00 am
Secretary of State

04-26-2000 90448 001 ***150.00

04-26-2000 90448 002 *****8.75



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0977221

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

CR2E034 (9/99)