2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P00000012268

1. Entity Name ST GENPAR INC.



Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90226 008 ***150.00

FILED

Principal Place of Business 1000 E. HILLSBORO BLVD. DEERFIELD BEACH FL 33441

Mailing Address

1500 W. Cypress Creek Road, Ste. 407 Ft. Lauderdale, FL 33309

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country



CHECK HERE IF MAKING CHANGES

65-0977892

Trust Fund Contribution.

4. FEI Number Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name

\$8.75 Additional Fee Required

Applied For

Not Applicable

BRENNER, SCOTT F C/O BRENNER REAL ESTATE GROUP 1000 E. HILLSBORO BLVD., STE 100 POMPANO BEACH FL 33069

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

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. I am familiar with, and accept

City

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

DATE

\$5.00 May Be Added to Fees

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of St.			
10.	OFFICERS AND DIRECT		

11.	ADDITIONS (CHANGES TO OFFICERS AND		
TITLE NAME STREET ADDRES CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND 1500 W. Cypress Creek Road, Ste. 407	D DIRECTOR:	S !N 11
TITLE NAME STREET ADDRE CITY-ST-ZIP	1500 W. Cypress Creek Road, Ste. 407	Change	☐ Addition
TITLE NAME STREET ADDRES CITY-ST-ZIP	1500 W. Cypress Creek Road, Ste. 407	Change	☐ Addition
TITLE NAME STREET ADDRI CITY-ST-ZIP	1500 W. Cypress Creek Road, Ste. 407	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	it, Daniel and Joseph	☐ Change	Addition
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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 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