

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2001 8:00 am**  
**Secretary of State**

04-23-2001 90001 034 \*\*\*158.75

**DOCUMENT # P00000014707**

1. Entity Name

**URBAN LEGACY, INC.**

Principal Place of Business

**6952 N.W. 30TH AVENUE  
 FORT LAUDERDALE FL 33309**

Mailing Address

**6952 N.W. 30TH AVENUE  
 FORT LAUDERDALE FL 33309**

2. Principal Place of Business

**6952 NW 30 Ave**

3. Mailing Address

**" "**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Fort Lauderdale**

City & State

**" "**

4. FEI Number

☒ Applied For

☐ Not Applicable

Zip

Country

**33309**

**U.S.A.**

Zip

Country

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

**HUNTER, LEON**

**6952 N.W. 30TH AVENUE  
 FORT LAUDERDALE FL 33309**

Name

**Leon Hunter**

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

**6952 NW 30 Ave**

City **Fort Lauderdale**

**FL**

Zip Code **33309**

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

**Leon Hunter**

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, 2001 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 **PVST** ☐ Delete  
 NAME **HUNTER, LEON**  
 STREET ADDRESS **6952 N.W. 30TH AVENUE**  
 CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

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

TITLE **CD** ☐ Delete  
 NAME **HUNTER, LEON**  
 STREET ADDRESS **6952 N.W. 30TH AVENUE**  
 CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

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

TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ 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 information.

SIGNATURE:

**Leon Hunter**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**1/5/01 (954) 975-3578**

Daytime Phone #

CR2E034 (10/00)