

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90120 010 ***150.00

0171432

DOCUMENT # P00000020110

1. Entity Name
39TH ST.,INC.

Principal Place of Business
230 5TH STREET
MIAMI BEACH FL 33139

Mailing Address
230 5TH STREET
MIAMI BEACH FL 33139

2. Principal Place of Business
1632 Pennsylvania Ave
 Suite, Apt. #, etc.

3. Mailing Address
1632 Pennsylvania Ave
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Miami Beach, FL
 Zip
33139
 Country
US

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Miami Beach, FL
 Zip
33139
 Country
US

4. FEI Number: **650986408** Applied For: Not Applicable

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

GRETENSTEIN, STEVEN
230 5TH STREET
MIAMI BEACH FL 33139

Name **Craig Robins**
 Street Address (P.O. Box Number is Not Acceptable)
1632 Pennsylvania Avenue
 City **Miami Beach** FL Zip Code **33139**

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 _____ DATE **3/25/01**
Signature, typed or printed name of registered agent and title (NOTE: Registered Agent signature required when reinstating)

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D	ROBINS, CRAIG	230 5TH STREET MIAMI BEACH FL 33139	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		1632 Pennsylvania Ave.	Miami Beach, FL 33139	<input type="checkbox"/>	<input type="checkbox"/>
	V. Pres.	Gretenstein, Steven	1632 Pennsylvania Ave Miami Beach, FL 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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, or all other like empowered.

SIGNATURE: _____ **Vice-President 3-19-01 305-531-8700**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)