

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90094 033 ***158.75

DOCUMENT # P00000020493

1. Entity Name
ROSE MANOR, A.L.F., INC.

Principal Place of Business 105 NURMI DRIVE FORT LAUDERDALE FL 33301	Mailing Address 105 NURMI DRIVE FORT LAUDERDALE FL 33301
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2. Principal Place of Business 840 SW 8 STREET	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State Pompano Beach, FL	City & State	4. FEI Number 65-0993259	Applied For Not Applicable
Zip 33060	Country USA	Zip	Country
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WEISS, HENRY 105 NURMI DRIVE FORT LAUDERDALE FL 33301		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 *Carol Weiss* (NOTE: Registered Agent signature required when reinstating) DATE 4/30/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so: **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	D WEISS, HENRY 105 NURMI DRIVE FORT LAUDERDALE FL 33301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, CAROL 105 NURMI DRIVE FORT LAUDERDALE FL 33301	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Carol Weiss* DATE 4/30/01 DAYTIME PHONE # 954-943-4666

UCR01010

CR2E034 (10/00)