

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 17, 2002 8:00 am
Secretary of State

05-17-2002 90031 025 ***150.00

DOCUMENT # P00000044872

1. Entity Name

Henig & Harger Realtors

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1047 E Atlantic Ave

3. Mailing Address

4605 NW 24th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Delray Beach, FL

City & State

City & State

Boca Raton, FL

Zip

Country

Zip

Country

33483

33431

4. FEI Number

65-1005542

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Frank Barbieri

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

3200 N Military Tr, Ste 200

Boca Raton

FL

Zip Code

33431

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
Director	Leonard R Harger	4605 NW 24th Ave	Boca Raton, FL 33431
Director	Leslie Henig	1047 E Atlantic Ave	Delray Beach, FL 33483
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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**DO NOT WRITE
IN THIS SPACE**

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 reports 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02 561 272-3131

CR2E034B (12/01)