

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 29, 2001 8:00 am**  
**Secretary of State**

03-29-2001 90027 022 \*\*\*150.00

**DOCUMENT # P00000048566**

1. Entity Name

**A & F INVESTMENT REALTY, CORP.**

Principal Place of Business

**20252 OCEAN KEY DRIVE  
 BOCA RATON FL 33498**

Mailing Address

**20252 OCEAN KEY DRIVE  
 BOCA RATON FL 33498**

2. Principal Place of Business

**211 SW. 2ND STREET**

3. Mailing Address

**211 SW. 2ND STREET**

Suite, Apt. #, etc.

**A**

Suite, Apt. #, etc.

**A**

City & State

**Fort Lauderdale FL**

City & State

**Fort Lauderdale FL**

4. FEI Number

**65-0998843**

Applied For

Not Applicable

Zip

**33301**

Country

**Broward**

Zip

**33301**

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

**MANIS, FRANK  
 20252 OCEAN KEY DRIVE  
 BOCA RATON FL 33498**

7. Name and Address of New Registered Agent

Name

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

**211 SW. 2ND STREET**

**Suite - A**

City

**Fort Lauderdale**

FL

Zip Code

**33301**

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

**FRANK MANIS Pres.**

**FRANK MANIS Pres.**

**3/23/01**

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

TITLE **PSD** ☐ Delete  
 NAME **MANIS, FRANK**  
 STREET ADDRESS **20252 OCEAN KEY DRIVE**  
 CITY-ST-ZIP **BOCA RATON FL 33498**

TITLE **VTD** ☐ Delete  
 NAME **COLA, ANNE**  
 STREET ADDRESS **20252 OCEAN KEY DRIVE**  
 CITY-ST-ZIP **BOCA RATON FL 33498**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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 like empowered.

SIGNATURE:

**FRANK MANIS Pres.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/23/01 (561) 212-3063**

Date

Daytime Phone #

0503463

CR2E034 (10/00)