

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000048894

1. Entity Name

GRT PROPERTIES, INC.

Principal Place of Business

3020 N FEDERAL HIGHWAY STE 11B  
FT LAUDERDALE FL 33306

Mailing Address

3020 N FEDERAL HIGHWAY STE 11B  
FT LAUDERDALE FL 33306

2. Principal Place of Business

150 SW 12TH AVE.

Suite, Apt. #, etc.

SUITE 480

City & State

Pompano Bch., FL.

Zip

33069

Country

USA

3. Mailing Address

150 SW 12TH AVE.

Suite, Apt. #, etc.

SUITE 480

City & State

Pompano Bch., FL.

Zip

33069

Country

USA

6. Name and Address of Current Registered Agent

TRAUB, GARY

3020 N FEDERAL HIGHWAY STE 11B  
FT LAUDERDALE FL 33306

7. Name and Address of New Registered Agent

Name

TRAUB, Gary

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

150 SW 12TH AVE.

SUITE 480

City

Pompano Bch.

FL

Zip Code

33069

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)

☐

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 D  
NAME TRAUB, GARY  
STREET ADDRESS 3020 N FEDERAL HIGHWAY STE 11B  
CITY-ST-ZIP FT LAUDERDALE FL 33306

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TRAUB, Gary  
NAME  
STREET ADDRESS 150 SW 12TH AVE. - SUITE 480  
CITY-ST-ZIP Pompano Bch., FL. 33069

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/14/01

Daytime Phone #

954/783-5100

FILED  
Feb 16, 2001 8:00 am  
Secretary of State

02-16-2001 90024 037 \*\*\*150.00

C0022214



DO NOT WRITE IN THIS SPACE

0245469

CR2E034 (10/00)