03/12/2001 14:28 9547427686 OPA OFFICES

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State
03-29-2001 91008 035 ***150.00

C00038569

DOCUMENT # P00000058696

1. Entity Name: Little Dorf Inc

Principal Place of Business: 9160 St Rd 84, Davie, Fl 33324, USA

Mailing Address: 9160 St Rd 84, Davie Fl 33324, USA

2. Principal Place of Business — Suite, Apt. #, etc. — City & State — Zip — Country

3. Mailing Address — Suite, Apt. #, etc. — City & State — Zip — Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-1037780 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent:
Dorfman, Andrew
8882 SW 57th Court
Cooper City, Fl 33328

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: _____ DATE

9. This corporation is eligible to satisfy its Tax filing requirement and elects to do (See criteria on back)

FILING WITH FEE IS $150.00 AND 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. CURRENT OFFICERS AND DIRECTORS — 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Change / Addition
Dorfman, Andrew 8882 SW 57th Court Cooper City, Fl 33328	☐		☐ / ☐
Dorfman, Brian 8882 SW 57 Court Cooper City Fl 33328	☐		☐ / ☐
	☐		☐ / ☐
	☐		☐ / ☐
	☐		☐ / ☐
	☐		☐ / ☐

CR2E034 (11/00)

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 all other like empowered.

SIGNATURE: _____ 3-10-01 954-474-5653

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone