

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000062016

1. Entity Name  
ANB HOLDINGS, INC.

Principal Place of Business  
4301 N. FEDERAL HWY.  
OAKLAND PARK FL 33308

Mailing Address  
4301 N. FEDERAL HWY.  
OAKLAND PARK FL 33308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2121173

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FAYSASH, GARY  
4301 N. FEDERAL HWY.  
OAKLAND PARK FL 33308

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME DEUSCHLE, JAY  
STREET ADDRESS 1100 NE 45TH ST.  
CITY-ST-ZIP FT. LAUDERDALE FL 33334

TITLE D ☐ Change ☒ Addition  
NAME Timothy Ingham  
STREET ADDRESS P.O. Box 11047  
CITY-ST-ZIP Ft. Lauderdale, FL 33339

TITLE D ☐ Delete  
NAME FAYSASH, GARY  
STREET ADDRESS 7750 SOLIMAR CIR.  
CITY-ST-ZIP BOCA RATON FL 33433

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

TITLE D ☐ Delete  
NAME FUHRER, JOHN  
STREET ADDRESS 179 ROYAL PALM DR.  
CITY-ST-ZIP FT. LAUDERDALE FL 33301

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

TITLE D ☐ Delete  
NAME INGHAM, FREDERICK  
STREET ADDRESS P. O. BOX 11047  
CITY-ST-ZIP FT. LAUDERDALE FL 33339

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

TITLE D ☐ Delete  
NAME INGHAM, RICHARD S  
STREET ADDRESS P. O. BOX 11047  
CITY-ST-ZIP FT. LAUDERDALE FL 33339

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

TITLE D ☐ Delete  
NAME INGHAM, RICHARD S JR.  
STREET ADDRESS P. O. BOX 11047  
CITY-ST-ZIP FT. LAUDERDALE FL 33339

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90012 043 \*\*\*550.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)