

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED**  
**Jul 19, 2001 8:00 am**  
**Secretary of State**

07-19-2001 90232 003 \*\*\*150.00

0028893  
AV**DOCUMENT # P00000064311**

1. Entity Name

**DOWNSIZE AMERICA, INC.**

Principal Place of Business

**6538 WEST ATLANTIC BLVD.  
POMPANO BEACH FL 33063**

Mailing Address

**6538 WEST ATLANTIC BLVD.  
POMPANO BEACH FL 33063**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**65-1021208**☒ Applied For  
☐ Not Applicable5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****COLEMAN, ANTHONY G JR.  
6538 WEST ATLANTIC BLVD.  
POMPANO BEACH FL 33063****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

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>MALLAD, ALLIE T</b>	
STREET ADDRESS	<b>6538 WEST ATLANTIC BLVD.</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL 33063</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>RECHTER, MICHAEL R</b>	
STREET ADDRESS	<b>6538 WEST ATLANTIC BLVD.</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL 33063</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/01  
Date(954) 984-9088  
Daytime Phone #

CR2E034 (5/01)



Box 0148  
Attachment

7/11/01

TO WHOM IT MAY CONCERN -

#P00000064311

I RECENTLY RECEIVED THE NOTICE FROM THE STATE REGARDING THE ANNUAL CORPORATION FILING. UNFORTUNATELY, THIS IS THE ONLY THE FIRST SUCH MAILING THAT WE HAVE RECEIVED AS WE NEVER RECEIVED THE INITIAL NOTICE. HAD WE RECEIVED IT, WE, OF COURSE WOULD HAVE REMITTED PAYMENT AS WE HAVE DONE WITH THE OTHER CORPORATIONS THAT WE WORK WITH.

If you HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CONTACT ME AT THE NUMBER LISTED BELOW. OTHERWISE, THANK YOU FOR YOUR UNDERSTANDING ON THIS MATTER.

SINCERELY,

Dr. MICHAEL RECHTER