

2001 UNIFORM BUSINESS REPORT (UBR)

0169108

DOCUMENT #. P00000072492

1. Entity Name

CARLAN HOLDINGS, INC.

FILED

01 MAY -1 PM 5:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

940 LINCOLN RD. STE 319
MIAMI BEACH FL 33139

Mailing Address

940 LINCOLN RD. STE 319
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

~~757 WASHINGTON AVE, 2ND FLOOR~~
MIAMI BEACH, FL 33139
Tel: 766.276.0000
Fax: 766.276.0000

Zip

Country

Zip

Country

4. FEI Number

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

PHILIPS, DAVID ESQ
940 LINCOLN RD, STE 319
MIAMI BEACH FL 33139

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOT

Registered Agent's 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
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 PS
NAME KLEMPNER, CARL
STREET ADDRESS 1900 SUNSET HARBOUR DR, 1606
CITY-ST-ZIP MIAMI BEACH FL 33139 ☒ Delete

TITLE V
NAME KLEMPNER, ANGELA
STREET ADDRESS 1900 SUNSET HARBOUR DR, 1606
CITY-ST-ZIP MIAMI BEACH FL 33139 ☒ 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 KLEMPNER, CARL
STREET ADDRESS 1900 SUNSET HARBOUR DR, #1410
CITY-ST-ZIP MIAMI BEACH FL 33139 ☒ Change ☐ Addition

TITLE
NAME KLEMPNER, ANGELA
STREET ADDRESS 1900 SUNSET HARBOUR DR, #1410
CITY-ST-ZIP MIAMI BEACH FL 33139 ☒ 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 empowers.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR

Date

Daytime Phone #

4.27.01

CR2E034 (10/00)