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2001 UNIFORM BUSINESS REPORT (UBR)

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Sep 10, 2001 8:00 am Secretary of State REAL ESTATE WORLD CORPORATION 09-10-2001 90062 032 ***558.75 Principal Place of Business Mailing Address 120 E. OAKLAND PARK BLVD. 120 E. OAKLAND PARK BLVD. SUITE 105 SUITE 105 FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAKER, DAVID Street Address (P.O. Box Number is Not Acceptable) 120 E. OAKLAND PARK BLVD. SUITE 105 FT. LAUDERDALE FL 33334 Zip Code FL 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Delete TITLE (5/01) TITLE ☐ Addition ☐ Change BAKER, DAVID NAME NAME 120 E. OAKLAND PARK BLVD. SUITE #105 STREET ADDRESS STREET ADDRESS CR2E034 FT. LAUDERDALE FL 33334 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change noitibhA [TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information the and that my signature shall have the same legal effect as if made under oath; that I am an officer or director the this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if provered. 13. I hereby certify that the information supplied with this filing does indicated on this report or supplemental report is true and accur