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1-22-01

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 24, 2001 8:00 am Secretary of State DOCUMENT # P0000082897 LBD DEVELOPMENT, INC. 04-24-2001 90355 035 ***150.00 Principal Place of Business Mailing Address 15320 SW 74TH PLACE 15320 SW 74TH PLACE MIAMI FL 33157 **MIAMI FL 33157** 00040266 Mailing Address Hallandale Beach Blod 2. Principal Place of Business 2100 E. Hallandale Beach Blow DO NOT WRITE IN THIS SPACE Applied For landale Beach ale Not Applicable \$8.75 Additional 5. Certificate of Status Desired . rry Fee Required ---6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FISHMAN, YALE 15320 SW 74TH PLACE MIAMI FL 33157 City 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 OFFICERS AND DIRECTORS 11. 12. Horden Delete President CR2E034 (10/00) TITLE Yale Fishman Larry Tolchiask NAME 2100 C. Hallandale Beach Blyd. # 200 15320 Sw 741x Place STREET ADDRESS STREET ADDRESS Hallandole Beach, Fla. 33009 Miami Fla. 35157 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Delete Change — Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE 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 TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.