2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 02, 2001 8:00 am Secretary of State DOCUMENT # P0000092605. **BOCA BARGAIN CORNER INC.** 04-02-2001 90046 030 ***150.00 Principal Place of Business Mailing Address 4555 ADAMS AVENUE 4555 ADAMS AVENUE MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 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 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY <u>David M Dobin</u> Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 4555 Adams Avenue Zip Code City Miami Beach 8. The above named en urnose of changing its registered office or registered agent, or both, in the State of Florida. David M Dobin 3/30/01 SIGNATURE tle if apolicable (NOTE: Registered Agent signature required when reinstating) name of registered agent ar FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangib 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. 10XX Asst Secy ☐ Change Addition CR2E034 (10/00 TITLE ☐ Delete TITLE DOBIN, DAVID M ESQ. NAME NAME 4555 ADAMS AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition P/D NAME NAME Daniel J Dobin STREET ADDRESS STREET ADDRESS One Bay Colony Lane CITY-ST-ZIP CITY-ST-ZIP Ft Lauderdale FL 33304 TITLE ☐ Delete. ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VP/S/T/D ☐ Change ☐ Addition TITLE Delete TITLE NAME Judy F Dobin NAME STREET ADDRESS STREET ADDRESS Dne Bay Colony Lane CITY-ST-ZIP CITY-ST-ZIP <u> t-Lauderdale FL 33304</u> Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS 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 supplied 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

Dobin Asst Secy 3/30/01 305-534-0419