FILED Feb 28, 2002 8:00 am Secretary of State

02-28-2002 90057 027 ***158.75

DO NOT WRITE IN THIS SPACE

2002 UNIFORM	BUSINESS	REPORT	(UBR)
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P00000109073

DOCUMENT #
1. Entity Name

B & S REALTY HOLDINGS, INC.

I INIC	ipai r i	ace of	Dus	1111655	
3151	W HA	LLAND.	ALE	BEACH	BLVD
PEME	BROKE	PARK	FL	33009	

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

3151 W HALLANDALE BEACH BLVD PEMBROKE PARK FL 33009

City & Stat	e	City & State		4. F	65-1060151		pplied For ot Applicable	
Zìp	Country	Zip	Country	5. 0	Certificate of Status Desired	\$8.75 Ad Fee Require		
	6. Name and Address of Current F	Registered Agent		7. N	lame and Address of New Registered	d Agent		
JOVANOVIC, DOUGLAS ESQ DOUGLAS JOVANOVIC, P.A.		Name						
		Street Add	ress (P.O. B	lox Number is Not Acceptable)				
17 SE 247	TH AVE							
POMPANO BEACH FL 33062		City		Fi	Zip Cod	le		
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.								
S'GNATURE .								
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	Registered Agent signature re	equired when rei	instating) 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 After May 1, 2002 Fee Make Check Payable to De		2 Fee will be \$550	.00 +	10. Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees		
11.	OFFICERS AND D	PIRECTORS	12.	AD	DITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS	RASHID, ISHKAT 3151 W HALLANDALE BEACH BLY	Delete	TITLE NAME STREET ADDRESS		***	☐ Change	☐ Addition	
CITY-ST-ZIP TITLE	PEMBROKE PARK FL 33009	□ Delete	CITY-ST-ZIP TITLE			☐ Change	☐ Addition	
NAME			NAME					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE ·		☐ Delete	TITLE			Change	☐ Addition	
NAME			NAME					
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TITLE		☐ Delete	TITLE			☐ Change	Addition	
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NAME			NAME			_		
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP		de	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 signifying 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 permpowered 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.								