

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90223 037 \*\*\*158.75

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DOCUMENT # P00000109073

1. Entity Name

B & S REALTY HOLDINGS, INC.



Principal Place of Business  
3151 W HALLANDALE BEACH BLVD  
PEMBROKE PARK FL 33009

Mailing Address  
3151 W HALLANDALE BEACH BLVD  
PEMBROKE PARK FL 33009

2. Principal Place of Business

3. Mailing Address

3652 CHURCHILL DOWNES DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

DAVIE, FL

4. FEI Number

65-1060151

Applied For

Not Applicable

Zip

Country

Zip

Country

33328

BROWARD

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

JOVANOVIC, DOUGLAS ESQ  
DOUGLAS JOVANOVIC, P.A.  
17 SE 24TH AVE  
POMPANO BEACH FL 33062

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DPS  
RASHID, ISHRAT  
3151 W HALLANDALE BEACH BLVD  
PEMBROKE PARK FL 33009

☐ Delete

TITLE  
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
RASHID, ISHRAT

4/25/03

Date

(954) 205-3022

Daytime Phone #

CFR2034 (10/02)