2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000052774

1. Entity Name
LEGAL REAL ESTATE, INC.

Principal Place of Business / Mailing Address
2929 E. COMMERCIAL BLVD SUITE 702
FORT LAUDERDALE, FL. 33308

FILED
02 SEP 12 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business: SEE ABOVE
Suite, Apt #, etc
City & State
Zip
County: BROWARD

3. Mailing Address: SEE ABOVE
Suite, Apt #, etc
City & State
Zip
Country: BROWARD

DO NOT WRITE IN THIS SPACE
05/14/02 90295 004 150.00

4. FEI Number: 16-1626204 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KEITH A. GASMAN
2929 E. COMM. BLVD. #702
FT. LAUD., FL. 33308

7. Name and Address of New Registered Agent
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.

SIGNATURE [signature] DATE 9/9/02

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME / STREET ADDRESS / CITY-ST-ZIP	
PRES.	KEITH A. GASMAN, 2929. E. COMM. BLVD #702, FT. LAUD., FL. 33308	☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete
		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		
	☐ Change	☐ Addition
	☐ Change	☐ Addition
	☐ Change	☐ Addition
	☐ Change	☐ Addition
	☐ Change	☐ Addition
	☐ Change	☐ Addition

CR2E034 (9/99)

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.

SIGNATURE: [signature], KEITH A. GASMAN, PRESIDENT 9/9/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date