2002 UNIFORM BUSINESS REPORT (UBR)

Geld 10 ton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OF DIRECTOR

2002 Uniform Business Report (UBR)						Apr 01, 2002 8:00 am				
DOCUMENT # P0100023593 MEN, INC.						Secretary of State 04-01-2002 90026 034 ***150.00				
Dringing! Digg	no of Divisions	Mallian Address								
Principal Place of Business Mailing Address 6843 N UNIVERSITY DR 6843 N UNIVERSITY DR										
TAMARAC FL		6843 N UNIVERSITY DR TAMARAC FL 33321								
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			<u>. </u>							
2. Principal F	Place of Business	3. Mailing Address 6846 N Whi	6846 N University Dr			T TRAINED THE GALLET FIRST BOTH BOTH BOTH TOLES HADE SHAD BUILD IN 1910 THE TOP				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	e	City & State Tamarac FL			4. F	4. FEI Number 65 · 109 0 332 Applied For				
7:-	Country	_ +				- 05 1070			Applicable	
Zip	Country	33321	Country		5. 0	Certificate of Status Desired		75 Addi Required		
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agen										
LEVY, MICHAEL				Name Geld, Natan						
6846 N U		Street Address (P.C			Number is Not Acceptable	$\mathcal{D}r$		1		
TAMARAC FL 33321				0						
			C	ity Ta	mara		FL Z	ip 3 3	39.1	
8. The above named entity submits this statement for the purpose of changing its re								<u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>	
SIGNATURE Signature, typed or printed name regulared agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
						· · · · · · · · · · · · · · · · · · ·		n i	ti.	
Tax filing	oration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Stat			0.00	te 10. Election Campaign Financing \$5.00 May Be Added to Fees				
11.	OFFICERS AND DIE		12.			DITIONS/CHANGES TO OFF		CTORS	IN 11	
TITLE X	P	Delete	TITLE			Lent Treasu	Lei XII o	hange	Addition	
NAME. Street address	LEVY, MICHAEL 2750 N 34TH AVE #A	·	NAME STREET AD	DRESS	56191 7630	DAK DL Natah				
CITY-ST-ZIP	HOLLYWOOD FL 33021		CITY-ST-Z		Coral.	SPrings, PLZ	3065			
TITLE	٧	Delete	TITLE		1.			hange	Addition	
NAME	SIEGEL, EDWARD	('	NAME							
STREET ADDRESS I	5620 NW 61 ST COCONUT CREEK FL 33073		STREET AD						1	
TITLE	S-	Detete	- TITLE -					hange	Addition	
NAME	GELD, NATAN		NAME	1.			_		_	
STREET ADDRESS	7630 LIVE OAK DR		STREET AD							
CITY-ST-ZIP	CORAL SPRINGS FL 33065		CITY-ST-Z	LIP				hange	Addition	
TITLE NAME		☐ Delete	TITLE NAME					nange	L_ AUGINUII	
STREET ADDRESS			STREET AD	DRESS)	
CITY-ST-ZIP			CITY-ST-Z	ZIP						
TITLE		☐ Delete	TITLE				□ c	hange	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADI	DRESS					}	
CITY-ST-ZIP			CITY-ST-Z							
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Delete	TITLE					hange	☐ Addition	
NAME			NAME STREET AND						}	
STREET ADDRESS CITY-ST-ZIP			STREET ADI	1					1	
	certify that the information supplied with thi	s filing does not qualify for t	_ U the exemption	on stated	d in Section 1	19.07(3)(i), Florida Statutes. I	further certify that	at the inf	ormation	
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.										