2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2002 8:00 am
Secretary of State
05-07-2002 90318 001 *****8.75
05-07-2002 90318 002 ***150.00

DOCUMENT # P01000034405

1. Entity Name
FLORIDIAN PROPERTY MANAGEMENT, INC.

Principal Place of Business	Mailing Address
PO BOX 291062 DAVIE FL 33329	PO BOX 291062 DAVIE FL 33329

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
P. O. Box 291062	P. O. Box 291062
Suite, Apt. #, etc.: N/A	Suite, Apt. #, etc.: N/A
City & State: Davie, Florida	City & State: Davie, Florida
Zip: 33328 Country: Broward	Zip: 33328 Country: Broward

4. FEI Number 03-0372613 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
GOTTLIEB, PAULELLA
2682 W ABAICA CIRCLE
DAVIE FL 33328

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 Paulella Gottlieb [signature] 4/25/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 IS $150.00
After May 1, 2002 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOTTLIEB, PAULELLA PO BOX 291062 DAVIE FL 33329 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Gottlieb, Paulella PO Box 291062 Davie, Florida 33329 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/01)

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: Paulella Gottlieb [signature] 954-915-0628
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 4/25/02 Daytime Phone #