

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000065030

1. Entity Name

NOW OR NEVER LIQUIDATION, INC.

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90908 035 ***150.00

0314549 AV

Principal Place of Business

5300 NW 33 AVENUE SUITE 117
FT. LAUDERDALE FL 33309

Mailing Address

5300 NW 33 AVENUE SUITE 117
FT. LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-1119227

Applied For
Not Applicable

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

~~SERCHAY, ALLEN~~

5300 NW 33 AVENUE SUITE 117
FT. LAUDERDALE FL 33309

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, 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 D
NAME APELBOIM, DANIEL
STREET ADDRESS 255 CODRINGTON DR
CITY-ST-ZIP FORT LAUDERDALE FL 33308 ☐ Delete

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

TITLE D
NAME CHESLA, MORRIS
STREET ADDRESS 1088 DEERWOOD LANE
CITY-ST-ZIP WESTON FL 33326 ☐ Delete

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

TITLE D
NAME JARAMILLO, DAVID
STREET ADDRESS 12204 SW 132 CT
CITY-ST-ZIP MIAMI FL 33186 ☐ Delete

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

TITLE D
NAME MARINEAU, MARIA
STREET ADDRESS 9621 FOUNTAINBLEAU BLVD. #412
CITY-ST-ZIP MIAMI FL 33172 ☐ Delete

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

DANNY APELBOIM 1/15/02 (954) 568-9600

CR2E034 (9/01)