

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-19-2002 90030 029 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000077937

1. Entity Name
UF PROPERTY HOLDINGS, INC.

Principal Place of Business Mailing Address
301 YAMATO RD. SUITE 2121 301 YAMATO RD. SUITE 2121
BOCA RATON FL 33431 BOCA RATON FL 33431

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 65-1137982 Applied For Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARTER, JOHN E
1200 N FEDERAL HWY, SUITE 312
BOCA RATON FL 33432

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!!! FEES \$150.00
After May 31, 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 Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Rodnevski, Pavel
17077 NewPort Club Drive
Boca Raton, FL 33496

TITLE Change Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
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TITLE Change Add
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CITY-ST-ZIP

TITLE Change Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Add
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)(b), Florida Statutes. I certify that this filing is a copy of this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made in person. I am an officer or director of the corporation or the registered agent authorized to execute this report as required by Chapter 607, Florida Statutes, and that I am not an agent, clerk, or employee of the Department of State.