

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90035 049 ***150.00

DOCUMENT # P01000080944

1. Entity Name
GATSBY'S KENDALL, INC.

Principal Place of Business

**5713 CORPORATE WAY
 SUITE 100
 WEST PALM BEACH FL 33407**

Mailing Address

**5713 CORPORATE WAY
 SUITE 100
 WEST PALM BEACH FL 33407**

80052052



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8515 SW 124th Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

1

4. FEI Number

65-1133881

Applied For

Not Applicable

Zip

33183

Country

USA

Zip

33183

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FIELDS, GARY D

ADMIRALTY TOWER - SUITE 700

4400 PGA BOULEVARD

PALM BEACH GARDENS FL 33410

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, 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

TITLE **PSTD** ☐ Delete
NAME **GRAHAM, ANTHONY**
STREET ADDRESS **5713 CORPORATE WAY #100**
CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE **VD** ☒ Delete
NAME **HABIB, KARL**
STREET ADDRESS **5713 CORPORATE WAY #100**
CITY-ST-ZIP **WEST PALM BEACH FL 33407**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

Anthony S. Graham **3/8/2002**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)