

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2003 8:00 am
Secretary of State

02-03-2003 90311 041 ***150.00

DOCUMENT # P01000089763

1. Entity Name
HARBOUR POINTE AT LAS OLAS, INC.

Principal Place of Business
**2875 N.E. 191ST STREET
AVENTURA FL 33180**

Mailing Address
**2875 N.E. 191ST STREET
AVENTURA FL 33180**

55052113

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 **APPLIED FOR**

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

**SERBER, DANIEL J
SERBER & ASSOCIATES, P.A.
TURNBERY PLAZ#801, 2875 NE 191ST ST.
AVENTURA FL 33180**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003: Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BATIEVSKY, ABRAHAM**
STREET ADDRESS **2875 N.E. 191ST STREET SUITE 801**
CITY-ST-ZIP **AVENTURA FL 33180**

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

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 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 #

1/24/03 **(305) 932-1177**

Attachment

LAW OFFICES
SERBER & ASSOCIATES, P.A.

TURNBERRY PLAZA, SUITE 801
2875 NORTHEAST 191ST STREET
AVENTURA, FLORIDA 33180
TELEPHONE (305) 932-6262
TELECOPY (305) 933-9393

55052113
[REDACTED]
#P01000089763

July 8, 2003

Via Certified Mail, Return Receipt Requested

#7002 3150 0001 5361 1339

Division of Corporations

Uniform Business-Report Filings

P.O. Box 1500

Tallahassee, Florida 32302-1500

Re: Batievsky - Harbor Point at Las Olas, Inc.

Document #P01000089763

Our File #209-16

Dear Sir or Madam:

We are in receipt of a Uniform Business Report Application showing that the filing fee is \$550.00. Enclosed for easy reference is a copy of the Uniform Business Report that was filed on January 30, 2003 with a check in the amount of \$150.00 which has already cleared our account. Can you please modify your records to show that this Corporation paid its renewal on a timely basis.

Thank you for your cooperation.

Very truly yours,


Daniel J. Serber

Encl.

tick: 7/15/03

DIS/tfk/9296