

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90162 047 ***150.00

DOCUMENT # **PD100D102626** ✓

1. Entity Name

B. RACZ, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2021 NW 29 ST

Suite, Apt. #, etc.

3. Mailing Address

1407 Royal York Rd.

Suite, Apt. #, etc.

Apt. 503

City & State

OAKLAND PARK

City & State

TORONTO ONTARIO

Zip

33311

Country

U.S.A.

Zip

M9P3A6

Country

CANADA

4. FZI Number

65-1147230

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name **BALINT RACZ**

Street Address (P.O. Box Number is Not Acceptable)

2021 NW 29 ST

City **OAKLAND PARK FL**

Zip **33311**

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 **Balint Racz**

(Signature, name of individual Agent of registered agent and title if applicable)

BALINT RACZ PRESIDENT Apr. 29, 2002

(Printed Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirements and elects to do so. ☐
(See outline on back)

10. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	P/V/T/I/S/D/C
NAME	BALINT RACZ
STREET ADDRESS	2021 OAKLAND PARK FL 33311
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), 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 590, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowerment.

SIGNATURE: **Balint Racz** **BALINT RACZ** **Apr. 29, 2002**

(Signature and typed or printed name of signing officer or director)

Date

Original Printed

CR250346 (12/01)