## FILED Apr 22, 2002 8:00 am

DOCUMENT # P01000107032  1. Entity Name  1834 CORAL RIDGE CORP.					Secretary of State 04-22-2002 90199 001 ***150.00			
Principal Place of Business P.O.BOX 4110 BOCA RATON FL 33429		Mailing Address P.O.BOX 4110 BOCA RATON FL 33429				-		υ
2. Principal Place of Business  Suite, Apt. #, etc.  City & State		3. Mailing Address  Suite, Apt. #, etc.  City & State			DO NOT WRITE IN THIS SPACE  4. FEI Number 65 - 1/52349   Applied For Not Applicable			
				4.				
Zip	Country	Zip	Country	5.	Certificate of Status Desi	red 🗍	<b>\$8.75</b> Ad	
	6. Name and Address of Current Re	egistered Agent	<u> </u>	7	Name and Address of N		Fee Require	ed
		-3 ra ragoint	Nar		Name and Address of N	en uchisteted b	yeni	
LEVIN, ZVI 2070 N OCEAN BLVD #3 BOCA RATON FL 33431			Stre	Street Address (P.O. Box Number is Not Acceptable)				
						"	71310	
			Ciţy	,		FL	Zip Cod	е
SIGNATURE .	named entity submits this statement for the named entity submits this statement for the name of registered agent and	title if applicable. (NOTE	E: Registered Agent	signature required when		DATE		
9. This corpo Tax filing I	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After May 1, 206 Make Check Payab	E. Registered Agent self. FEE IS \$1	signature required when 50.00 e \$550.00		DATE gn Financing		0 May Be
9. This corport Tax filing (See criter	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible requirement and elects to do so.  OFFICERS AND DI	FILE NOW! After May 1, 200 Make Check Payab	E. Registered Agent self. FEE IS \$1	signature required when 50.00 e \$550.00 nent of State	reinstating)  10. Election Campaig	DATE gn Financing bution.	Added	to Fees
9. This corpo Tax filing I	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After May 1, 206 Make Check Payab	E: Registered Agents III FEE IS \$1 02 Fee will be ole to Departr	signature required when 150.00 e \$550.00 nent of State	10. Election Campaig Trust Fund Contri	DATE gn Financing bution.	Added	to Fees
9. This corporate from the street address street address significant significant street address significant street str	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so, ria on back)  OFFICERS AND DI.  P LEVIN, ZVI P.O.BOX 4110 BOCA RATON FL 33429 S LEVIN, SARA P.O.BOX 4110	FILE NOW! After May 1, 200 Make Check Payab	E: Registered Agents  !!! FEE IS \$1  02 Fee will be ble to Departr  12.  TITLE  NAME  STREET ADDR	signature required when 150.00 e \$550.00 nent of State  A	10. Election Campaig Trust Fund Contri	DATE on Financing bution.	DIRECTOR:	to Fees
9. This corpor Tax filing in (See criter)  11.  TITLE  IMME  STREET ADDRESS  CITY-ST-ZIP  TITLE  IAME  ITLE  IAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so, ria on back)  OFFICERS AND DI.  P LEVIN, ZVI P.O.BOX 4110 BOCA RATON FL 33429 S LEVIN, SARA	FILE NOW! After May 1, 206 Make Check Payab RECTORS	E: Registered Agent :  III FEE IS \$1  02 Fee will be ble to Departr  12.  TITLE  NAME  STREET ADDR  CITY-ST-ZIP  TITLE  NAME  STREET ADDR	signature required when 150.00 e \$550.00 nent of State  A  ESS	10. Election Campaig Trust Fund Contri	DATE on Financing bution.	DIRECTOR	1 to Fees S IN 11 Addition
9. This corporate file of the corporate file	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so, ria on back)  OFFICERS AND DI.  P LEVIN, ZVI P.O.BOX 4110 BOCA RATON FL 33429 S LEVIN, SARA P.O.BOX 4110	FILE NOW! After May 1, 200 Make Check Payab RECTORS  Delete	E: Registered Agent s  III FEE IS \$1  02 Fee will be bie to Departr  12.  TITLE  NAME  STREET ADDR  CITY-ST-ZIP  TITLE  NAME  STREET ADDRI  TITLE  NAME  STREET ADDRI  TITLE  NAME  STREET ADDRI  STREET ADDRI  STREET ADDRI	signature required when 150.00 e \$550.00 nent of State  A ESS	10. Election Campaig Trust Fund Contri	DATE on Financing bution.	DIRECTOR:  Change	S IN 11 Addition Addition
9. This corpor Tax filing in (See criter Int.  11.  11.  11.  11.  11.  11.  11.	Signature, typed or printed name of registered agent and pration is eligible to satisfy its Intangible requirement and elects to do so, ria on back)  OFFICERS AND DI.  P LEVIN, ZVI P.O.BOX 4110 BOCA RATON FL 33429 S LEVIN, SARA P.O.BOX 4110	FILE NOW! After May 1, 20th Make Check Payab RECTORS Delete Delete	E: Registered Agent :  III FEE IS \$1  02 Fee will be to Departr  12.  TITLE  NAME  STREET ADDR.  CITY-ST-ZIP  TITLE  NAME  STREET ADDR.  STREET ADDR.  STREET ADDR.  STREET ADDR.  STREET ADDR.	Signature required when 150.00 e \$550.00 ment of State  A  ESS  ESS  ESS	10. Election Campaig Trust Fund Contri	DATE gn Financing bution.	☐ Change ☐ Change	d to Fees S IN 11 Addition Addition Addition

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

That I am an officer or director of 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 by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if chapter 607, Florida Statutes; and that my name appears in Block 12 if cha

2002 UNIFORM BUSINESS REPORT (UBR)

4-11-02 501-391-9233 Date Daytime Phone #