


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

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90033 032 ***158.75

DOCUMENT # P02000005428

1. Entity Name
36TH BISCAYNE INC ✓



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9045 LA FONTANA BLVD
Suite, Apt. #, etc.
ste C-4

3. Mailing Address
9045 LA FONTANA BLVD
Suite, Apt. #, etc.
ste C-4

DO NOT WRITE IN THIS SPACE

City & State
BOCA RATON, FL

City & State
BOCA RATON, FL

Zip
33434 Country
USA

Zip
33434 Country
USA

4. FEI Number _____ Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
ROBERT DESALVO

Street Address (P.O. Box Number is Not Acceptable)
9045 LA FONTANA BLVD

ste C5

City
BOCA RATON FL Zip Code
33434

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 ROBERT DESALVO DATE 3/18/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1st - May 1st Fee is \$150.00
After May 1st Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE <u>PRESIDENT, TREASURER, SECRETARY</u>	TITLE	NAME	STREET ADDRESS
NAME <u>ROBERT DESALVO</u>	NAME	NAME	NAME
STREET ADDRESS <u>9045 LA FONTANA BLVD 05</u>	STREET ADDRESS	STREET ADDRESS	STREET ADDRESS
CITY-ST-ZIP <u>BOCA RATON FL 33434</u>	CITY-ST-ZIP	CITY-ST-ZIP	CITY-ST-ZIP
TITLE	TITLE	TITLE	TITLE
NAME	NAME	NAME	NAME
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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(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 on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT DESALVO DATE 3/18/03 56-218-2755

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)



800.795.19
P02000005428

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 11, 2003

36th Biscayne, Inc.
Attn: Robert DeSalvo
9045 LaFontana Blvd., C-4
Boca Raton, FL 33434

SUBJECT: 36TH BISCAYNE, INC.
Ref. Number: P02000005428

We have received your document for 36TH BISCAYNE, INC. and check(s) totaling \$33.75. However, your check(s) and document are being returned for the following:

Per our phone conversation, I am returning the unsigned check and document for the subject corporation. Please make the change in officers/directors/registered agent by filing the 2003 uniform business report. A form is enclosed. Note filing fee.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6901.

Susan Payne
Senior Section Administrator

Letter Number: 803A00015016