

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

6/27/2003-90051-004-\$150.00-\$150.00

Page 1st

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000033354** (2)

1. Entity Name

FI Realty Management, Inc.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**3389 Sheridan Street**

3. Mailing Address  
**Same**

Suite, Apt. #, etc.  
**# 248**

Suite, Apt. #, etc.

City & State  
**Hollywood, Florida**

City & State

Zip  
**331021**

Country  
**USA**

Zip

Country

4. FEI Number  
**33-1065802**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
**Ira B. Price**

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

**9100 S. Dadeland Blvd. # 1701**

City  
**Miami**

**FL**

Zip Code  
**33156**

**DO NOT WRITE  
IN THIS SPACE**

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

**Ira B. Price**

**06/17/03**

Signature, typewritten printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ANNETTE C. MARQUINA P/S/T/D  
3389 SHERIDAN ST., STE. #248  
HOLLYWOOD FL 33021**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Pres 6/17/03 9349877300**

Date

Daytime Phone #

CR2EX34B (12/02)

Attachment PAGE 2 of 2  
10108947  
# PO 2000 33354

**IRA B. PRICE, P.A.**

Attorney at Law

9100 S. Dadeland Blvd. PH-1 Suite 1701 Miami, Florida 33156 (305) 670-3030 Fax: (305) 670-0016

e-mail: tothepoint@prodigy.net

June 25, 2003

Tyrone Scott  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302-1500

Re: Uniform Business Reports

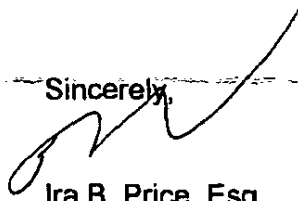
Dear Mr. Scott:

Enclosed are the following:

- Letter requesting waiver of fee, Uniform Business Report, and Check No. 1148 in the amount of \$150 for South Broward Housing, Inc.
- Letter requesting waiver of fee, Uniform Business Report, and Check No. 1149 in the amount of \$150 for J.B. Realty Management, Inc.
- Letter requesting waiver of fee, Uniform Business Report, and Check No. 1150 in the amount of \$150 for Bancol of America, Inc.
- Letter requesting waiver of fee, Uniform Business Report, and Check No. 1151 in the amount of \$150 for FL. Realty Management, Inc.

If you have any questions, please do not hesitate to contact me. Email would be preferred.

Sincerely,



Ira B. Price, Esq.  
Attorney at Law

IBP:jr

pc: Jeannette Blanco

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