

FILED

03 DEC 23 AM 9:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000051506

1. Entity Name

CAPITAL INTEGRATED REAL ESTATE SERVICES, INC.



Principal Place of Business

9526 N.W. 52ND PLACE  
CORAL SPRINGS FL 33076

Mailing Address

9526 N.W. 52ND PLACE  
CORAL SPRINGS FL 33076

2. Principal Place of Business

6559 SW 128 way  
Suite, Apt. #, etc.

3. Mailing Address

4460 NW 63 Drive  
Suite, Apt. #, etc.

City &amp; State

PARKLAND, FL

City &amp; State

COCONUT CREEK, FL

Zip

33076

Country

USA

Zip

33073

Country

USA

4. FEI Number

EIN 27-0049473

Applied For

Not Applicable

5. Certificate of Status Desired

☒\$8.75 Additional  
Fee Required☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

MITCHELL, CRAIG  
9526 N.W. 52ND PLACE  
CORAL SPRINGS FL 33076

7. Name and Address of New Registered Agent

Name CRAIG - MITCHELL

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

6559 SW 128 way

City PARKLAND

FL

Zip Code

33076

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

11/1/03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE D  
NAME MITCHELL, CRAIG  
STREET ADDRESS 9526 N.W. 52ND PLACE  
CITY-ST-ZIP CORAL SPRINGS FL 33076 ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME MITCHELL, CRAIG  
STREET ADDRESS 6559 SW 128 way  
CITY-ST-ZIP PARKLAND, FL. 33073 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 REQUIRED

11/1/03

Date

Daytime Phone #