

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90344 046 ***150.00

0700144 IN

DOCUMENT # P02000064600

1. Entity Name
ST. REGIS BROCK APTS INC.



Principal Place of Business
**1604 ST. REGIS BOULEVARD
DORVAL QUEBEC CANADA H9P-1H6**

Mailing Address
**1604 ST. REGIS BOULEVARD
DORVAL QUEBEC CANADA H9P-1H6**

2. Principal Place of Business

9827 BROCKBANK DRIVE

3. Mailing Address

P.O. BOXS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
DALLAS, TX

City & State
STOWE, VT

4. FEI Number
52-2383176

Applied For
Not Applicable

Zip
75220

Country

Zip
05672-0005

Country

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**CASTELLANO, NELSON T
101 E. KENNEDY BOULEVARD
SUITE 2700
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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** ☐ Delete
NAME **GROSS, STEPHEN**
STREET ADDRESS **1604 ST. REGIS BOULEVARD**
CITY-ST-ZIP **DORVAL QUEBEC CANADA H9P-1H6**

TITLE **D** ☐ Delete
NAME **TEITELBAUM, IRVING**
STREET ADDRESS **1604 ST. REGIS BOULEVARD**
CITY-ST-ZIP **DORVAL QUEBEC CANADA H9P-1H6**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

STEPHEN GROSS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 22/03 (514) 421-8720

Date

Daytime Phone #

CR2E034 (10/02)