

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 15, 2003 8:00 am**  
**Secretary of State**

09-15-2003 90154 013 \*\*\*150.00

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**DOCUMENT # P02000091639**

1. Entity Name

**FOX REAL ESTATE GROUP, INC.**



Principal Place of Business  
**208 N. US HIGHWAY 1, SUITE 6  
TEQUESTA FL 33469**

Mailing Address  
**208 N. US HIGHWAY 1, SUITE 6  
TEQUESTA FL 33469**



2. Principal Place of Business

**312 S. OLO DIXIE**

3. Mailing Address

**5376 SE SERENOA TERR.**

Suite, Apt. #, etc.

**204**

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

**JUPITER, FLORIDA**

City & State

**HOBE SOUND, FL.**

4. FEI Number

**48-1272609**

Applied For

Not Applicable

Zip

Country

**USA**

Zip

**33455**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FOX, RITA C**

**5376 SE SERENOA TERRACE**

**HOBE SOUND FL 33455**

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

**9-9-03**

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
FOX, RITA C  
5376 SE SERENOA TERRACE  
HOBE SOUND FL 33455**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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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**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Rita C. Fox**

Date

Daytime Phone #

**9-9-03 561-718-5517**

CR2E034 (4/03)

Attachment

80148188  
#P02000041639 9/8/03

To whom it May Concern

DUE TO A CHANGE IN COMPANY  
ADDRESS, FOX REAL ESTATE GROUP,  
DID NOT RECEIVE THIS NOTICE UNTIL  
NOW! APPARENTLY THE FORWARDING  
OF MAIL HAS PRESENTED A REAL  
CHALLENGE!!

PLEASE ACCEPT THE ORIGINAL FILING  
FEE OF \$150.<sup>00</sup> AND PLEASE WAIVE  
THE ADDITIONAL PENALTY FEE.

~~With Sincere Regrets~~

Ryda Fox.

Owner/BROKER.

561-718-5517.