

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90147 006 ***158.75

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1. Entity Name

SYLVIA EQUITIES, INC.



Principal Place of Business

Mailing Address

C/O LH ROSOFF & CO., LLP
61 WATER MILL LN
GREAT NECK NY 11021

2. Principal Place of Business

19380 COLLINS AVE

3. Mailing Address

Suite, Apt. #, etc.

#1118

Suite, Apt. #, etc.

City & State

SUNNY ISLES BEACH, FL

City & State

4. FEI Number

56-2301306

Applied For

Not Applicable

Zip

33160

Country

USA

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

IAN REISNER
19380 COLLINS AVE #1118
SUNNY ISLES BEACH, FL 33160

7. Name and Address of New Registered Agent

Name
IAN REISNER

Street Address (P.O. Box Number is Not Acceptable)
19380 COLLINS AVE #1118

City
SUNNY ISLES BEACH

FL

Zip Code
33160

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

Ian Reisner

3/13/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
IAN REISNER (PRES) ☐ Delete
19380 COLLINS AVE #1118
SUNNY ISLES BEACH, FL 33160

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
GEORDEN REISNER (VP) ☐ Delete
417 E 64 ST
NY, NY 10021

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
GABRIELLE WEISFELD (ASSISTANT V.P.) ☐ Delete
250 E 39TH ST
NY, NY 10016

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
JARED WEISFELD (SEC) ☐ Delete
69 HALLEY DRIVE
POMONA, NY 10970

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MARTIN WEISFELD (TRES) ☐ Delete
69 HALLEY DRIVE
POMONA, NY 10970

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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:

Ian Reisner 3/13/03