

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90455 048 ***158.75

DOCUMENT # P02000125645

1. Entity Name

PALM BEACH REAL ESTATE INVESTMENT GROUP, INC.



Principal Place of Business

1404 SOUTH N STREET
LAKE WORTH FL 33460

Mailing Address

1404 SOUTH N STREET
LAKE WORTH FL 33460

2. Principal Place of Business

1404 South N Street

Suite, Apt. #, etc.

3. Mailing Address

1404 South N Street

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Lake Worth

City & State
Lake Worth

4. FEI Number

Applied For
Not Applicable

Zip
33460

Country
Palm Beach

Zip
33460

Country
Palm Beach

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name
SANDOR KOBLER

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

1404 South N Street

City
Lake Worth

FL

Zip Code
33460

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

SANDOR KOBLER SANDOR KOBLER

4/16/02

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
KOBLER, SANDOR
1404 SOUTH N STREET
LAKE WORTH FL 33460

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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☐ 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 persons empowered.

SIGNATURE:

SANDOR KOBLER SANDOR KOBLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)