## 2001 UNIFORM BUSINESS REPORT (UBR)

## Feb 21, 2001 8:00 am Secretary of State **DOCUMENT # P35254** AIPG REALTY CORPORATION 02-21-2001 90070 026 \*\*\*150.00 Principal Place of Business Mailing Address C/O C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM P.O. BOX 631 P.O. BOX 631 WILMINGTON DE 19899 WILMINGTON DE 19899 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 51-0334547 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ... 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10.=Election Campaign Financing. \$5:00 May Be ... Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) ☐ Addition ☐ Change TITLE ☐ Delete TITLE ROSE, BARRIE D NAME NAME 2100-38 AVE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TORONTO, ONT., CANADA CITY-ST-7IP Addition ☐ Delete TITLE ☐ Change ROSE, JOHN A. NAME 28 PEVERIL HILL ROAD NORTH STREET ADDRESS STREET ADDRESS TORONTO ON\_\_\_\_\_\_\_\_\_ CITY-ST-ZIP, CITY-ST-ZIP\_ AS Delete TITLE Change ☐ Addition ROSE, ROBERT A NAME NAME 44 ST JOSEPH STREET STE 2614 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TORONTO ON Change TITLE ☐ Delete TITLE ☐ Addition ROSE, PAUL A. NAME NAME 2100-38 AVE ROAD STREET ADDRESS STREET ADDRESS City-St-ZiF TORONTO ONT. CAN MSR263 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

**FILED** 

SIGNATURE: BENEFIT BARLIE D. ROSE TESTER 9, 2001 416 145 - 3333

1 hereby certify that the information supplied with this filling 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like-empowered.