## 2002 UNIFORM BUSINESS REPORT (UBR)

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

SIGNATURE:

FEQUIRED

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 25, 2002 8:00 am Secretary of State P92000007801 **DOCUMENT #** 1. Entity Name SHELCAN III, CORPORATION 02-25-2002 90575 039 \*\*\*150 00 Mailing Address Principal Place of Business 2450 N.E. MIAMI GARDENS 9601 COLLINS AVE. SECOND FLOOR BAL HARBOUR FL 33154 NORTH MIAMI BEACH FL 33180 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 65-0371914 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ...... 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SUPRASKI, LOUIS A ESQ. Street Address (P.O. Box Number is Not Acceptable) 2450 N.E. MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH FL 33180 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Delete TITLE TITLE STEIN, SHELDON NAME NAME 9601 COLLINS AVE., PH-304 STREET ADDRESS STREET ADDRESS BAL HARBOR FL 33154 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE STEIN, MIRIAM NAME NAME 9601 COLLINS AVE STREET ADDRESS STREET ADDRESS BAL HARBOR FL 33154 CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF [1] Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if

FILED

Hachment # 1801 Socument 000 1801 PA 200000 326463 SMITH & SUPRASKI PROFESSIONAL ASSOCIATION 2450 N.E. MIAMI GARDENS DRIVE (186TH STREET) SECOND FLOOR NORTH MIAMI BEACH, FLORIDA 33180 JOSE SMITH TELEPHONE ATTORNEY AT LAW (305) 792-0060 LOUIS A. SUPRASKI BOARD CERTIFIED (305) 792-0061 REAL ESTATE LAWYER PHILIPPE LIEBERMAN ATTORNEY AT LAW February 14, 2002 **Division of Corporations** Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500 2002 Uniform Business Report for: Re: SHELCAN III Dear Sir\Madam: Enclosed please find the 2002 Uniform Business Report for the above referenced corporation, along with our office account check in the amount of \$150.00 representing the filing fee. Thank you for your assistance in this matter. Very truly yours. Sandra D. Moreion Office Manager /sdm Enclosures 有69、为成为新城建一。