FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 19, 2001 8:00 am DOCUMENT # **P9300001408 Secretary of State** FLORIDA UTF EMBASSY BOULEVARD, INC. 02-19-2001 90065 013 ***150.00 Principal Place of Business Mailing Address % UNITED TRUST FUND % UNITED TRUST FUND 701 BRICKELL AVE., SUITE 1300 701 BRICKELL AVE., SUITE 1300 MIAMI FL 33131-2851 MIAMI FL 33131-2851 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 65-0373810 Not Applicable Zip Country Country Zip \$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 LEVINE, BRUCE M Street Address (P.O. Box Number is Not Acceptable) 5310 N.W. 33RD AVE. SUITE 119 FORT LAUDERDALE FL 33309 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITI E DOMB, SIDNEY NAME NAMÉ STREET ADDRESS STREET ADDRESS % 701 BRICKELL AVE., SUITE 1300 CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33131</u> TITLE ☐ Delete TITLE ☐ Addition NAME BERLINER, LILLIAN NAME STREET ADDRESS STREET ADDRESS % 701 BRICKELL AVE., SUITE 1300 CITY-ST-ZiP CITY-ST-ZIP MIAMI FL 33131 TITLE TITLE Change | ☐ Addition ☐ Delete NAME BERLINER, GEORGE NAME STREET ADDRESS STREET ADDRESS % 701 BRICKELL AVE., SUITE 1300 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33:131 TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME BERLINER, FRED STREET ADDRESS STREET ADDRESS % 701 BRICKELL AVE., SUITE 1300 CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33131 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-219 CITY-ST-7IP 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 *l* 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