

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91234 042 ***550.00

DOCUMENT # P93000021410

1. Entity Name

NILPETER, INC.

Principal Place of Business

15851 SW 41ST STREET
SUITE #800
DAVIE FL 33331
US

Mailing Address

15851 SW 41ST STREET
SUITE #800
DAVIE FL 33331
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip
33331

Country

Zip
33331

Country

4. FEI Number **65-0397656**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POLTORACK, RONALD D
555 SAWGRASS CORPORATE PKWY.
SUNRISE FL 33325

Name

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

City

FL

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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	PSD LITTLE, JOHN D	5317 NW 35TH TERRACE	FT LAUDERDALE FL 33309	<input type="checkbox"/>		Chairman John D. Little	15851 SW 41st St, Ste 800	Davie, FL 33331	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D ERIKSEN, LARS	5317 NW 35TH TERRACE	FT LAUDERDALE FL 33309	<input type="checkbox"/>		Director Lars Eriksen	15851 SW 41st St, Ste 800	Davie, FL 33331	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>		President & CEO E. E. E. E. E.	15851 SW 41st St, Ste 800	Davie, FL 33331	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)