

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 06, 2001 8:00 am
Secretary of State

07-06-2001 90209 022 ***550.00

DOCUMENT # P93000030231

1. Entity Name

FIRST FINANCIAL OF SOUTH FLORIDA, INC.

Principal Place of Business

**1261 S. PINE IS RD
 PLANTATION FL 33324
 US**

Mailing Address

**2875 HUNTER RD
 WESTON FL 33331
 US**

2. Principal Place of Business

2760 SHIRUP Lane
 Suite, Apt. #, etc.

3. Mailing Address

2760 SHIRUP Lane
 Suite, Apt. #, etc.

City & State

Weston, Florida

City & State

Weston, Florida

4. FEI Number

65-0410379

Applied For

Not Applicable

Zip

33331

Country

USA

Zip

33331

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**OLINICK, SCOTT
 1261 S. PINE ISLAND RD.
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Olinick, Scott

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

2760

2760 SHIRUP Lane

City

Weston

FL

Zip Code **33331**

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/1/01

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **OLINICK, KERRI**
 STREET ADDRESS **1257 S. PINE ISLAND RD**
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **VP** ☐ Delete
 NAME **OLINICK, SCOTT**
 STREET ADDRESS **1257 S. PINE ISLAND RD**
 CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
 NAME **Olinick, Kerri**
 STREET ADDRESS **2760 SHIRUP Lane**
 CITY-ST-ZIP **Weston, FL 33331**
 Address

TITLE **VP** ☒ Change ☐ Addition
 NAME **Olinick, Scott**
 STREET ADDRESS **2760 SHIRUP Lane**
 CITY-ST-ZIP **Weston, FL 33331**
 Address

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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)(j), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/01 954560-4840

Date

Daytime Phone #

0069854 AV

CR2E034 (5/01)