

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 27, 2001 08:00 AM**
Secretary of State**DOCUMENT # P93000036657**1. Entity Name
L. BARON, LTD., INC.

Principal Place of Business

130 SW THIRD AVE

DANIA
33004

FL

Mailing Address

5440 LA GORCE DR

MIAMI BEACH
33140

FL

2. Principal Place of Business

130 SW THIRD AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DANIA BEACH

FL

City & State

Zip
33004

Country

Zip

Country

4. FEI Number

13-9249717

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WEISS SAMUEL
130 SW 3RD AVEDANIA
33004

FL

US

7. Name and Address of New Registered Agent

Name

WEISS SAMUEL

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

130 SW 3RD AVE

City

DANIA BEACH

FL

Zip Code
33004

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)

04/27/2001

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 State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	CONSTANTIN LOTTIE	
STREET ADDRESS	130 SW 3RD AVE	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WEISS SAMUEL	
STREET ADDRESS	130 SW 3RD AVE	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	P	<input type="checkbox"/> Delete
NAME	WEISS ELAINE BALOFF	
STREET ADDRESS	130 SW THIRD AVE.	
CITY-ST-ZIP	DANIA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONSTANTIN LOTTIE	
STREET ADDRESS	130 SW 3RD AVE	
CITY-ST-ZIP	DANIA BEACH FL 33004	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEISS SAMUEL	
STREET ADDRESS	130 SW 3RD AVE	
CITY-ST-ZIP	DANIA BEACH FL 33004	
TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEISS ELAINE BALOFF	
STREET ADDRESS	130 SW THIRD AVE.	
CITY-ST-ZIP	DANIA BEACH FL 33004	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(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: SAMUEL WEISS

S/D

04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)