

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 25, 2001 8:00 am**
Secretary of State

04-25-2001 90048 005 ***150.00

DOCUMENT # P93000061004

1. Entity Name

ROBERT S FRANKL INC.

Principal Place of Business

**4060 N 41ST COURT
HOLLYWOOD FL 33021**

Mailing Address

**4060 N 41ST COURT
HOLLYWOOD FL 33021**

2. Principal Place of Business

12671 Countryside Terrace

3. Mailing Address

12671 Countryside Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Cooper City, FloridaCity & State
Cooper City, Florida4. FEI Number **65-0437178**Applied For
Not ApplicableZip
33330Country
BrowardZip
33330Country
Broward5. 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

**FRANKL, ROBERT S
4060 N 41ST COURT
HOLLYWOOD FL 33021**Name
Frankl, Robert S.

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

12671 Countryside TerraceCity **Cooper City, Florida** **FL** **33330**

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

Robert Frankl**April 20/01**

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **FRANKL, ROBERT S**
STREET ADDRESS **4060 N 41ST COURT**
CITY-ST-ZIP **HOLLYWOOD FL 33021**TITLE **D** ☒ Change ☐ Addition
NAME **Frankl, Robert S.**
STREET ADDRESS **12671 Countryside Terrace**
CITY-ST-ZIP **Cooper City, Florida 33330**TITLE **T** ☐ Delete
NAME **FRANKL, TRUDY**
STREET ADDRESS **4060 N 41 CT**
CITY-ST-ZIP **HOLLYWOOD FL 33021**TITLE **T** ☒ Change ☐ Addition
NAME **Frankl, Trudy**
STREET ADDRESS **12671 Countryside Terrace**
CITY-ST-ZIP **Cooper City, Florida 33330**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**Robert Frankl****April 20/01**

Date

(305) 754-0004

Daytime Phone #

CR2E034 (10/00)