2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 19, 2002 8:00 AM
Secretary of State

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Entity Name: PASADENA AT PLS, INC.

Current Principal Place of Business:

11801 PEMBROKE RD
SUITE 100
PEMBROKE PINES, FL 33025 US

New Principal Place of Business:

Current Mailing Address:

11801 PEMBROKE RD
SUITE 100
PEMBROKE PINES, FL 33025 US

New Mailing Address:

FEI Number: 65-0460832 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

E.H.G. RESIDENT AGENTS, INC.
5100 TOWN CENTER CIRCLE
SUITE 330
BOCA RATON, FL 33486 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	BERGER, DAVID J	
Address:	175 NW FIRST AVE. STE. 2000 COURTHOUSE CNT	
City-St-Zip:	MIAMI, FL 331289965	
Title:	P	( ) Delete
Name:	MILLER, ROBERT B	
Address:	1000 N HIATUS RD	
City-St-Zip:	PEMBROKE PINES, FL	
Title:	VPS	( ) Delete
Name:	MILLER, LEONARD	
Address:	1000 N HIATUS RD	
City-St-Zip:	PEMBROKE PINES, FL	
Title:	VPT	( ) Delete
Name:	BERGER, ADOLPH J	
Address:	1000 N HIATUS RD	
City-St-Zip:	PEMBROKE PINES, FL	
Title:	V	( ) Delete
Name:	KALIN, MORTON	
Address:	1000 N HIATUS RD	
City-St-Zip:	PEMBROKE PINES, FL	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT B. MILLER PRES 04/19/2002

Electronic Signature of Signing Officer or Director Date