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2001 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nan		DOS366 ERAL HIGHWAY	FILED					
5340 107	N. Fed. Hwy. hthouse Point,FL 33064	Mailing Address C/O Wolfso 104-18 Met Forest Hil	O1 DEC -4 PH 2:57 Garvey PCSECRETARY OF STATE ve TALLAHASSEE, FLORIDA					
9600 Suite, Apt.	·	3. Mailing Address 9600 W. Sample Road Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat	e 300 Î Springs, FL	Suite 300 Coral Springs, FL			4. FEI Number Applied For 65 – 0 4 6 2 6 4 7 Not Applicable			
Zip 330		^{Zip} 33065	Countr	Š	5. Certificate of Status Desired			
	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent			
Cani	dor Androw T	•	1	Name S	Steven W. Deutsch, Esq.			
	der, Andrew I. NW 59 Street		F		ess (P.O. Box Number is Not Acceptable)			
	Raton, FL 33496		L		7805 SW 6 Ct.			
воса	Raton, FL 33490		1					
	- -				Plantation FL 33324			
8. The above	named entity submits this statement for	the purpose of changing its re	gistered	d office or reg	gistered agent, or both, in the State of Florida.			
SIGNATURE					12/3/01			
OKAN ONE	Signature, typed or partial name of registered agent ar	nd title if applicable. (NOTE:	Registered /	Agent signature re	kquired when reinstating) DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Tax filing requirement and elects to do so.								
11.	OFFICERS AND D	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
NAME STREET ADDRESS CITY-ST-ZIP	President Sneider, Andrew 2335 NW 59 St. Boca Raton, FL 3	•	TITLE NAME STREET CITY-S	ADDRESS	President Sneider, Andrew I. Schange Addition 9600 W. Sample Road, #300 Coral Springs, FL 33065			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET CITY-ST	ADDRESS T-ZIP	☐ Change ☐ Addition 점			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET CITY-ST	ADDRESS T-ZIP	Change Addition			
TITLE NAME STREET ADDRESS CITY+ST-ZIP		□ Delete	TITLE NAME STREET CITY-ST	ADORESS T-ZIP	Change			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET. GITY-ST	ADORESS T-ZIP	. Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	CITY-ST		H Change Addition			
13. I hereby certify that the information supplied with this filling 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 ago that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the occitor 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: (1/3/0)								



ACCOUNT NO. : 072100000032

REFERENCE :

555906

9029A

AUTHORIZATION

COST LIMIT : \$ 70.00

ORDER DATE : December 4, 2001

ORDER TIME : 10:51 AM

ORDER NO. : 555906-015

CUSTOMER NO:

9029A

CUSTOMER: Ms. Lorraine Vanella

Frank Weinberg & Black, Pl

7805 Sw 6th Court

Plantation, FL 33324

O1 DEC -4 M II: 51
DLPAINING OF STATION OF CORPORATION OF CORPORATION OF STATION OF STAT

ANNUAL REPORT FILING

AMENDED

NAME:

5340 NORTH FEDERAL HIGHWAY ASSOCIATION, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder-EXT#1118

EXAMINER'S INITIALS: