

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000007920

1. Entity Name

HOLCO DEVELOPMENT CORP.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90095 043 ***158.75

Principal Place of Business

Mailing Address

11302 ROUNDELAY RD.
COOPER CITY FL 33026

11302 ROUNDELAY RD.
COOPER CITY FL 33026-1352

2. Principal Place of Business

SIGG EAST 11TH AVE

3. Mailing Address

SIGG EAST 11TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HIALSAH FLORIDA

City & State

HIALSAH FLORIDA

4. FEI Number

65-0484080

Applied For

Not Applicable

Zip

33013

Country

DADE

Zip

33013

Country

DADE

5. 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

B & C CORPORATE SERVICES, INC.
201 S BISCAYNE BLVD
SUITE 3000
MIAMI FL 33131

Name

JEFFREY OSTROW

ESQUIRE

H E B E
SIGN

EAST LAS OLAS BLVD SUITE 1440
G LAUDERDALE FL 33301

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)

DATE

Jeffrey Ostrow

4/26/00

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, 2000 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 PC ☐ Delete

NAME CUTLER, BRUCE
STREET ADDRESS 11302 ROUNDELAY RD.
CITY-ST-ZIP COOPER CITY FL

TITLE PC ☒ Change ☐ Addition

NAME CUTLER Bruce
STREET ADDRESS 20833 CIPRES WAY
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ST ☐ Delete

NAME SHEAR, FRANK
STREET ADDRESS 3 GROVE ISLE DRIVE PH 3
CITY-ST-ZIP COCONUT GROVE FL

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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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)(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:

BRUCE CUTLER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00
Date

954 466 3737
Daytime Phone #

CR2E034 (9/99)