## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

WESTON FL 33326

SUITE 101

US

1555 NORTH PARK DRIVE

## P94000008197 DOCUMENT #

1. Entity Name SANDLER ENTERPRISES, INC.

Principal Place of Business

1555 NORTH PARK DR

WESTON FL 33326

SUTIE 101



FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90185 025 \*\*\*150.00

TUULUUT

S. Country  S. Country  S. Country  S. Country  S. Country  S. Contilicate of Status Desired   \$8.75 Additional   \$8.75 Additional   \$6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  FORTHURA FL 33180  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number	z. Frilicipal Flace of Business		3. Walling Address							
Separation   Sep	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  ROSEN, LAWRENCE N 2005-AUGUNGE 2005-AUGUN	City & State		City & State		4. 1	El Number 65-04	166081	<del></del>	oplied For ot Applicable	
ROSEN, LAWRENCE N 2025 AVENTURA EL 33180  8. The above named exfers submits his statement for the durpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acceptable)  SIGNATURE  SIGNATURE  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  SIGNATURE  SANDLER, HARVEY  100 LEE WAGERINER BLVD STUE-301  TITLE  SANDLER, HYLLS  SANDLER, HYLLS  SANDLER, HYLLS  SANDLER, HYLLS  SANDLER, HYLLS  SANDLER BLYD STUE-301  TITLE  SANDLER BLYD STUE-301  TITLE  SANDLER BLYD STUE-301  TITLE  SANDLER BLYD STUE-301  TOE  SANDLER BLYD STUE-301  TOE  SANDLER BLYD STUE-301  TOE  SANDLER BLYD STUE-301  TOE  STRET ADDRESS  TOES 1-70  TOE  STRET ADDRESS  THE BLYD STEE SO11  TOER  STRET ADDRESS  THE BLYD STEE SO11  TOER  NAME  STRET ADDRESS  THE BLYD STEE SO11  TOER BLYD STEE BLYD STEE SO11	Zip	Country	Zip .	Country	5. (	Certificate of Status [	Desired			
ROSEN, LAWRENCE N  995 AVENTURA EL 33180    AVENTURA EL 33180		6. Name and Address of Curren	t Registered Agent		7. 1	lame and Address	of New Registere	J Agent		
B. The above named optiny submits this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar wiff, and accident of purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar wiff, and accident of purpose of purpose area to a purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar wiff, and accident of the control of purpose of purpose area to a purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar wiff, and accident of the control of purpose of changing its registered agent, or both, in the State of Florida. I am tamiliar wiff, and accident of the control o	<del>2925</del> AVE	NTURA BLVD_STUE	Rosen Lawrence N							
SIGNATURE  Significant, Need to printed rained agreed agreed to printed rained agreed		·	City N. Minmi Beach FL Zip Code 80							
After May 1, 2003 Fee will be \$550.00    Selection Carringing Institution   Added to Fee And Directions   Selection   Added to Fee And Directions   Selection Carringing Institution   Added to Fee And Directions   Added to Fee And D	the obligati	ions of Affistered agent.	Loeu Lawren	nce N. Ros	en		1/9/03	>	and accept	
TITLE NAME STREET ADDRESS DITY-ST-ZIP NAME STREET ADDRESS DITY-ST-ZIP NAME STREET ADDRESS DITTLE NAME STREET ADDRESS STREET ADDRESS DITTLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS DITTLE NAME STREET ADDRESS STREET ADDRESS DITTLE NAME STREET ADDRESS STREET	After	May 1, 2003 Fee will be \$550.00	1							
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ITILE NAME SANDLER, PHYLLIS 1050 LEE WAGERNER BLVD SLITIE 301 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TOST LEVINE, JEFFREY M 1050 LEE WAGENER BLVD STE 301 FORT LAUDERDALE FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TOTLE TOTL	NAME Street address	SANDLER, HARVEY 1050 LEE WAGERNER BLVD ST		NAME STREET ADDRESS	1555 Wes	North F	ank Or. 33326	/	☐ Addition	
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NAME STREET ADDRESS STREET ADDRESS	NAME Street address	• •	□ Delete	NAME STREET ADDRESS				Change	☐ Addition	
12. 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	NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied wit		NAME STREET ADDRESS CITY-ST-ZIP	ed in Section	119.07(3)(i). Florida S	Statutes. I further o	·	Addition Addition	

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.