

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90029 035 ***150.00

DOCUMENT # P94000021999

1. Entity Name
ELLMAN CONSULTING, INC.

Principal Place of Business

Mailing Address

730 W MCNAB RD
FT LAUDERDALE FL 33309

730 W MCNAB RD
FT LAUDERDALE FL 33309

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0479502

Applied For

Not Applicable

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

GALLO, ROBIN
730 W MCNAB ROAD
FT LAUDERDALE FL 33309

Name KEVIN SIROP

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

730 W MCNAB RD

City FT. LAUDERDALE

FL

Zip Code 33309

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 both applicable.

KEVIN SIROP T/V. / AS

01/02/01

(NOTE: Registered Agent signature required when reinstating)

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 15, 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 P
NAME ELLMAN, J. LEON
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

TITLE DIP
NAME J. LEON ELLMAN
STREET ADDRESS 730 W MCNAB ROAD
CITY-ST-ZIP FT. LAUDERDALE, FL 33309 ☒ Change ☐ Addition

TITLE D
NAME ELLMAN, ELAINE
STREET ADDRESS 730 W. MCNAB ROAD
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME SIROP, KEVIN
STREET ADDRESS 730 WEST MCNAB RD
CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Delete

TITLE V / AS IT
NAME KEVIN SIROP
STREET ADDRESS 730 W MCNAB ROAD
CITY-ST-ZIP FT. LAUDERDALE, FL 33309 ☒ Change ☐ Addition

TITLE VPS
NAME BERK, ARTHUR J
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Delete

TITLE V IS
NAME ARTHUR J. BERK
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE, FL 33309 ☒ Change ☐ Addition

TITLE VP
NAME ELLMAN, NEIL
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Delete

TITLE V
NAME NEIL ELLMAN
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE, FL 33309 ☒ Change ☐ Addition

TITLE VP
NAME ELLMAN, LANCE
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE FL 33309 ☐ Delete

TITLE V
NAME LANCE ELLMAN
STREET ADDRESS 730 W MCNAB RD
CITY-ST-ZIP FT LAUDERDALE, FL 33309 ☒ Change ☐ Addition

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

Date

Daytime Phone #

1/9/01 (954) 977-3094

CR2E034 (10/00)