

00-03
FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT # **P94000025114**

1. Entity Name

ASTOR BRICKELL Corp.



03 JAN 16 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

956 WASHINGTON AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI BEACH, FL

City & State

4. FEI Number

65-0480423

Applied For

Not Applicable

Zip

33139

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

HERB E DEUSCHEL

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

BERKOVITS, LAGO & Co.

8211 W. Broward Blvd.

City

PLANTATION

FL

Zip Code

33324

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when amending)

1-15-2003

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D, P, S, T
MASRI, KARIM
956 WASHINGTON AVE
MIAMI BEACH, FL 33139**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

600010164886
01/16/03--01068--001 **\$600.00

**DO NOT WRITE
IN THIS SPACE**

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 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 on an attachment with an address, with all other like empowered.

SIGNATURE

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**KARIM MASRI,
President**

1-15-03

305-531-8088

Date

Daytime Phone #

CR2E034B (12/02)

2/1/07

ASTOR BRICKELL CORP.

956 Washington Ave.
Miami Beach, FL 33139

January 15, 2003

State of Florida
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: Reinstatement of Corporation

Dear Reader:

Enclosed, please find, a Uniform Business Report (UBR) for Astor Brickell Corp. We were unaware that this corporation had been administratively dissolved on September 22, 2000. The corporation had received no mailings from the state to renew the corporation or that the corporation had been administratively dissolved.

In addition, enclosed is a check in the amount of \$600.00 which will cover the filing fees for 2000, 2001, 2002 and 2003.

If you should have any questions, please contact me at 305-531-8081 or my accountant at 954-475-3199.

Sincerely,



Karim Masri,
President

cc: Herb E. Deuschel
Berkovits, Lago & Co. LLP