

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000025490**

1. Entity Name
WALDEN EQUITIES CORPORATION



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 NOV 21 AM 10:57

Principal Place of Business
**1000 VENETIAN WAY., APT 2008
MIAMI FL 33139
US**

Mailing Address
**1000 VENETIAN WAY., APT 2008
MIAMI FL 33139
US**

11/20/03 01026 003 165.00



2. Principal Place of Business
**5600 COLLINS AVE.
Suite, Apt. #, etc.
P.H. A**

3. Mailing Address
**5600 COLLINS AVE
Suite, Apt. #, etc.
P.H. A**

REINSTATEMENT 03
☐ CHECK HERE IF MAKING CHANGES

City & State
**MIAMI BEACH
Zip 33140 Country 0000**

City & State
**MIAMI BEACH
Zip 33140 Country 0000**

4. FEI Number **65-0498460**

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

**SCHAFER, RICHARD
1000 VENETIAN WAY., APT 2008
MIAMI FL 33139**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	☐ Delete
NAME	SCHAFER, RICHARD	
STREET ADDRESS	1000 VENETIAN WAY., APT 2008	
CITY-ST-ZIP	MIAMI FL 33139	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

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 Block 11 if changed, or on an attachment with an address with another like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/2

CR2E034 (10/02)

2/2

Nov. 3rd 2003

Walden Equities Corp
5600 Collins Ave, P.H A
Miami Beach, FL 33140
Tel. 305-866-2955

RE: Ref. NR. P 94000025490

Dear Ms. Pat Bailey:

As per our telephone conversation of today
I am sending enclosed check in the amount
of \$ 165.00 for reinstating
Walden Equities Corporation

As I told you, there was a mixup with
the correct adresse

The Address: 5600 Collins Ave, Penthouse "A"
will not be occupied by us until the end
of January 2004

Please send all correspondence until then
to: 5600 Collins Ave, Penthouse "B"

Thank you for waiving the reinstatement
fee plus penalty.

Sincerely,
Helga Schaffr
Helga Schaffr