2001 UNIFORM BUSINESS REPORT (UBR)

Apr 07, 2001 8:00 am Secretary of State DOCUMENT # P94000045153 PARK SHERIDAN WEST, INC. 04-07-2001 90012 047 ***150.00 Principal Place of Business Mailing Address 3990 SHERIDAN ST 3990 SHERIDAN ST nuu43454 SUITE#209 SUITE#209 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 US US 2. Principal Place of Business 3. Mailing Address 3107 STIPLING ROAD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 204 City & State City & State Applied For 4. FEI Number 65-0505269 FL FT. LAUDERDALE Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired D.S.A. 6. Name and Address of Current Registered Agent. 7. Name and Address of New Registered Agent BERMAN, STEVEN B. Street Address (P.O. Box Number is Not Acceptable) 3390 SHERIDAN ST SUITE 209 HOLLYWOOD FL 33021 Zip Code City 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) Change ☐ Addition Delete TITLE TITLE 3107 Stirling Road BERMAN, HOWARD B NAME NAME Suite 204 STREET ADDRESS STREET ADDRESS 3990 SHERIDAN ST Ft Lauderdale, FL 33312 CITY-ST-7IP CITY-ST-ZIP HOLLYWOOD FL ☐ Addition TITLE TITLE ☐ Delete 3107 Stirling Road BERMAN, STEVEN B NAME NAME Suite 204 STREET ADDRESS STREET ADDRESS 3990 SHERIDAN ST Ft Lauderdale, FL 33312 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL TITLE" TIŤLE Delete NAME WEIL, MICHAEL J NAME STREET ADDRESS 4410 SHERIDAN ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change ☐ Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information inplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information liabreport 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 up the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if indicated on this report or supple of the corporation or the receiver

SIGNATURE:

changed, or on an attachment with

V-P. STEVE BERNAN, VICE PRESIDENT
TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

dress, with all other like empowered.

3-26-01

(954) 981-7744

Daytime Phone #