

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P94000048029**

1. Entity Name
SHOPPES OF HILLSBORO II, INC.

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90156 038 ***150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**2201-2265 W HILLSBORO BLVD
DEERFIELD BEACH FL 33442
US**

Mailing Address
**% A. SINGER #2008
3100 N OCEAN BLVD
FORT LAUDERDALE FL 33308**

2. Principal Place of Business
Above
Suite, Apt. #, etc.

3. Mailing Address
Above
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0501640**

Applied For
Not Applicable

Zip Country

Zip Country

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

**SINGER, ALLEN
3100 N OCEAN BLVD
APT 2008
FT LAUDERDALE FL 33308**

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.

SIGNATURE *Allen Singer*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Jan 20, 2001
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 1, 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 NAME ☐ Delete
**P SINGER, ALLEN
3100 N OCEAN BLVD, SUITE 2008
CITY-ST-ZIP FT LAUDERDALE FL 33308**

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
STREET ADDRESS
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CITY-ST-ZIP

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

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

Allen Singer
ALLEN SINGER

1/20/01
Date

904 565-8867
Daytime Phone #

CR2E034 (10/00)