## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## **FILED** DOCUMENT # **P94000075466** Apr 26, 2000 8:00 am Secretary of State MANCHESTER LEEDS, CORP. 04-26-2000 90048 025 \*\*\*150.00 Mailing Address Principal Place of Business 2717 W. CYPRESS CREEK RD. 2717 W. CYPRESS CREEK RD. STE. #700 STE. #700 FT. LAUDERDALE FL 33309 FT, LAUDERDALE FL 33309-1703 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0528451 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Samuel-J-Cantor-CANTOR, SAMUEL J Street Address (P.O. Box Number is Not Acceptable) 1489 WEST PALMETTO PARK ROAD 6700 Broken Sound Pkwy NW SUITE 485 Suite 200 **BOCA RATON FL 33486** 3348 ij, Boca Ratón g its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submi SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intengible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. 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. Change **XX**Addition X Delete TITLE TITLE Steven G Rose 🖔 DAVID L. PARKER NAME STREET ADDRESS 2717 W Cypress Creek Rd 2717 W. CYPRESS CREEK RD. STREET ADDRESS CITY-ST-ZIP Ft Lauderdale, FL 33309 FT. LAUDERDALE FL 33309 CITY-ST-ZIP **XX**Addition ☐ Change X XXDelete TITLE TITLE. Philip Stickles PARKER, DEBRA NAME NAME 2717 W Cypress Creek Rd STREET ADDRESS 2717 W. CYPRESS CREEK RD. STREET ADDRESS CITY-ST-ZIF Ft Lauderdale, FL 33309 FT. LAUDERDALE FL 33309 CITY-ST-ZIP Delete Change XX Addition TITLE TITLE Karen Hood NAME NAME 2717 W Cypress Creek Rd STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Ft Lauderdale, FL 33309 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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.