

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000005935

1. Entity Name

NATIONAL INSTITUTIONAL SALES, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90129 033 ***150.00

Principal Place of Business

Mailing Address

5225 NORTH WEST 33RD AVENUE
 FT. LAUDERDALE FL 33309-6302
 US

PO BOX 770070
 CORAL SPRINGS FL 33077-0070
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0553875

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

BOLTON, RICHARD
 110 NES DAIRY RD
 STE 210
 N. MIAMI BCH FL 33179

Name

HARRY STEINMAN

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

5225 N.W. 33RD AVE.

City

FT. LAUDERDALE

FL

Zip Code

33309

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

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

(NOTE: Registered Agent signature required when reinstating)

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, 2000 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 P ☐ Delete
 NAME STEINMAN, ROBERT
 STREET ADDRESS 5211 NW 33 AV
 CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 5225 N.W. 33rd Ave
 CITY-ST-ZIP Fort LAUDERDALE, FL. 33309

TITLE D ☐ Delete
 NAME STEINMAN, HARRY
 STREET ADDRESS 2375 NE 195 STREET
 CITY-ST-ZIP MIAMI FL 33180

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 5225 N.W. 33rd Ave
 CITY-ST-ZIP Fort LAUDERDALE, FL. 33309

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
 NAME
 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

HARRY STEINMAN

Date

4/17/00

Daytime Phone #

954-485-5000

CR20014 (9/93)