(772) 231-2929

Date

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # P95000026292 1. Entity Name ATLANTIC VIEW REALTY, INC.						Apr 07, 2002 8:00 am Secretary of State 04-07-2002 90087 026 ***150.00					
Principal Place of Business 1401 HIGHWAY A-1-A STE 203 VERO BEACH FL 32963		Mailing Address 1401 HIGHWAY A-1-A STE 203 VERO BEACH FL 32963									
2. Principal Place of Business		3. Mailing Address				T INDIVIDUO IIIO IRIIRI BIIII BONIN OONIN BONIN BONIN BONIN BIIIO IIBN BIIIO IIII IIII					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State			4.	FEI Number	65-0580137		Not	Applicable	1
Zip 🏋	Country	Zip	Count	ry	5.	Certificate of	Status Desired		75 Addi Required		
<u> </u>	== 6-Name and Address of Current R	egistered Agent			7	Name and A	ddress of New Reg	istered Ager	it		1
CALDWELL, WILLIAM W 756 BEACHLAND BOULEVARD VERO BEACH FL 32963				Street Ac 97.9 VERO	OCK, SAMUEL A. Address (P.O. Box Number is Not Acceptable) BEACHLAND BOULEVARD CO RO BEACH Zip Code 32963						
8. The above	named entity submits this statement for	2. Block Inditite if applicable. (NOTE	: Registered	d Agent signatu	re required when r		in the State of Florid	3/22/ DATE	102		
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, 2002 Fee will be \$550.00 Make Check Payable to Department of St			50.00 of State	Trust	ion Campaign Finar Fund Contribution.		Added	May Be to Fees	
11.	OFFICERS AND D		12.			DDITIONS/C	HANGES TO OFFIC] ←
NAME STREET ADDRESS CITY-ST-ZIP	D HENRIQUEZ, LEOPOLDO 1401 HIGHWAY A-1-A SUITE 203 VERO BEACH FL 32963	☐ Delete	III .			LGHWAY .	OPOLDO A-1-A / SU L 32963	_	Change	Addition	CR2E034 (9/01)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	- II			GHWAY .	A-1-A / SUI L 32963	 -	Change -	X Addition	5
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	II.		1401 H	GHWAY .	., LEOPOLDO A-1-A / SU L 32963)	Change	★ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	- 18 -						Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	- II						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY	E Et address -St-zip					Change	Addition	
13. I hereby of indicated of the corchanged	certify that the information supplies with con this report or supplemental report is poration or the receiver or trustee empore, or on an attachment with a address or on an attachment with a continuous continu	this films does not qualify for true and accurate and that n wered to execute this report the all other like empowered.	the exemple the the the the the the the the the th	mption stat ture shall har red by Cha	ed in Section ave the same pter 607, Flor	119.07(3)(i), legal effect a rida Statutes;	Florida Statutes. I fo as if made under oa and that my name	urther certify that I am a appears in Blo	nat the int n officer o ock 11 or	formation or director Block 12 if	