

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90266 008 ***158.75

0506371

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1. Entity Name

4520 NBR CORP.

Principal Place of Business

4520 NORTH BAY ROAD
MIAMI FL 33131

Mailing Address

2000 PALM BEACH LAKES BLVD
STE 301
W PALM BCH FL 33409
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0687957

Applies 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

CAMERON-HAYES, JONATHAN
2000 PALM BEACH LAKES BLVD
STE 301
W PALM BCH FL 33409

Name

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

City

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

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

(NOTE: Registered Agent's 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, 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 STREET ADDRESS CITY-ST-ZIP	PD HELLMANN, JOST 2090 PALM BEACH LAKES BLVD, STE 801 WEST PALM BEACH FL 33409	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CAMERON-HAYES, JONAHAN 2090 PALM BEACH LAKES BLVD, STE 801 WEST PALM BEACH FL 33409	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Hellmann, Jost 10450 Doral Blvd MIAMI, Florida 33178	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Hellmann, Klaus 10450 Doral Blvd MIAMI, Florida 33178	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director and President Karl Weyeneth 10450 Doral Blvd MIAMI, Florida 33178	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary and Treasurer MARY ANNE LOCKE 10450 Doral Blvd MIAMI, Florida 33178	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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

Date

Day and Month

CR2E034 (10/00)