

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000050177

1. Entity Name
SENDER'S ART, INC.

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90306 049 ***150.00

Principal Place of Business

PENTHOUSE II
9350 S. DIXIE HWY
MIAMI FL 33156

Mailing Address

PENTHOUSE II
9350 S. DIXIE HWY
MIAMI FL 33156

2. Principal Place of Business

16017 S.W. 74 PLACE

Suite, Apt. #, etc.

Suite #100

3. Mailing Address

16017 S.W. 74 PLACE

Suite, Apt. #, etc.

Suite #100

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33157

Country

MIAMI-DADE

Zip

33157

Country

MIAMI-DADE

4. FEI Number

65-0746744

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ROVIN, GARY B ESQ.
PENTHOUSE II
9350 S. DIXIE HWY
MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

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

16017 S.W. 74 PLACE - SUITE 100

City **MIAMI**

FL

Zip Code

33157

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

Gary B. Rovin **GARY B. ROVIN**

MARCH 8, 2001

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, 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

TITLE **D** ☐ Delete
NAME **SENDER, GREG**
STREET ADDRESS **10910 S.W. 153 CT.**
CITY-ST-ZIP **MIAMI FL 33196**

TITLE **D** ☐ Delete
NAME **SENDER, DOLORES**
STREET ADDRESS **10910 S.W. 153 CT.**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ Delete
NAME **ROVIN, GARY B**
STREET ADDRESS **9350 S. DIXIE HWY PENTHOUSE-2**
CITY-ST-ZIP **MIAMI FL 33156**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **16017 SW 74 PLACE - SUITE 100**
CITY-ST-ZIP **33157**

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

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

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:

Gary B. Rovin **GARY B. ROVIN**

3/8/01

Date

305-969-6986

Daytime Phone #

CR2E034 (10/00)