

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000077492

1. Entity Name

RELLO REALTY AND DEVELOPMENT, INC.

FILED

Mar 19, 2001 8:00 am  
Secretary of State

03-19-2001 90020 012 \*\*\*150.00

Principal Place of Business

1954 S. University Dr  
6540 MELALEUCA ROAD  
FORT LAUDERDALE FL 33330  
DAVID 33324

Mailing Address

6540 MELALEUCA ROAD  
FORT LAUDERDALE FL 33330

SOME

634939



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0679583

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KLEIN, SHAMIRA ESQ.  
20803 BISCAYNE BLVD.  
SUITE 200  
AVENTURA FL 33180

KORN, GARY A ESQ  
20803 BISCAYNE BLVD  
AVENTURA, FL 33180

Name

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

City

FL

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 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input type="checkbox"/> Delete
NAME	SIEGEL, RONNIE	
STREET ADDRESS	6540 MELALEUCA ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33330	
TITLE	<del>DAVID</del>	<input checked="" type="checkbox"/> Delete
NAME	<del>OLLER, ROBERT</del>	
STREET ADDRESS	6460 MEALEUCA ROAD	
CITY-ST-ZIP	FORT LAUDERDALE FL 33330	
TITLE	SIEGEL MARC	<input type="checkbox"/> Delete
NAME	7896 N. S. Herado Circle	
STREET ADDRESS	DAVID, FL 33024	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Ronnie Siegel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/01

Date

(954)

473-5662

Daytime Phone #

CR2E034 (10/00)