

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90031 025 ***150.00

DOCUMENT # P95000078500

1. Entity Name
JEFFREY SACHS DESIGN, INC.

Principal Place of Business 364 GOLF VIEW ROAD SUITE 508 N PALM BEACH FL 33408	Mailing Address 364 GOLF VIEW ROAD SUITE 508 N PALM BEACH FL 33408
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3874 FISCAL COURT Suite, Apt. #, etc. 200	3. Mailing Address Suite, Apt. #, etc.
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City & State RIVIERA BEACH, FL	City & State
Zip 33404	Country USA

4. FEI Number 65-0612984	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**SACHS, NOREEN
 364 GOLF VIEW ROAD
 SUITE 508
 N PALM BEACH FL 33408**

7. Name and Address of New Registered Agent
 Name **SACHS, NOREEN**
 Street Address (P.O. Box Number is Not Acceptable) **3874 FISCAL COURT SUITE#200**
 City **RIVIERA BEACH** **FL** Zip **33404**

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 *Jeffrey Sachs* DATE 2/26/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SACHS, NOREEN 364 GOLFVIEW RD #508 N. PALM BEACH FL 33408 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELLFY, JEFFREY 364 GOLFVIEW RD #508 N. PALM BEACH FL 33408 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SACHS, NOREEN 3874 FISCAL COURT #200 RIVIERA BEACH, FL. 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BELLFY, JEFFREY 3874 FISCAL COURT #200 RIVIERA BEACH, FL. 33404 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Jeffrey Sachs* **JEFFREY SACHS** DATE 2/26/02 **564-863-3325**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)