

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000064207

1. Entity Name

LEVIRICH, INC.

FILED

Apr 19, 2001 8:00 am  
Secretary of State

04-19-2001 90295 011 \*\*\*150.00

Principal Place of Business

2665 S. BAYSHORE DR  
SUITE 603  
MIAMI FL 33133

Mailing Address

% MARSHA G. MADORSKY, CARLTON FIELDS  
100 S.E. 2ND STREET, 40TH FLOOR  
MIAMI FL 33131

2. Principal Place of Business

100 SE Second Street

3. Mailing Address

100 SE Second Street

Suite, Apt. #, etc.

Suite 4000

Suite, Apt. #, etc.

Suite 4000

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

65-0690672

Applied 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

MADORSKY, MARSHA G ESQ  
100 S.E. 2ND STREET  
40TH FLOOR  
MIAMI FL 33131

Name

Marsha G. Madorsky, Esq.  
Street Address (P.O. Box Number is Not Acceptable)

Suite 4000

City

Miami

FL

Zip Code

33131

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

MARSHA MADORSKY

3-15-01

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 PR ☐ Delete  
NAME LEVITT, RICHARD  
STREET ADDRESS 2665 S BAYSHORE DRIVE, #603  
CITY-ST-ZIP MIAMI FL 33133

TITLE PR ☒ Change ☐ Addition  
NAME LEVITT, RICHARD  
STREET ADDRESS 1150 Campo Sano Avenue, Suite 301  
CITY-ST-ZIP Miami, Florida 33146

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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CITY-ST-ZIP

TITLE ☐ Delete  
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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD  
LEVITT

3/20/01

Date

305-666-3310

Daytime Phone #

CR2E034 (10/00)