

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

1. Entity Name
MFR INVESTMENTS INC.

p96 000077968

FILED

02 APR 30 AM 8:49

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6699 NW 2ND AVENUE

Suite, Apt. #, etc.

SUITE 315

City & State

BOCA RATON FL

Zip

33487

Country

3. Mailing Address

150 WESLEY STREET

Suite, Apt. #, etc.

Box 1867

City & State

SOUTH HACKENSACK, NJ

Zip

07606

Country

4. FEI Number

65-0701751

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

MOLLIE FRISCH

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

6699 NW 2ND AVE

SUITE 315

City

BOCA RATON

FL

Zip Code

33487

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

Mollie Frisch

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

(NOTE: Registered Agent signature required when reinstating)

MOLLIE FRISCH, PRES.

DATE

4/23/2002

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
**PSTD
MOLLIE FRISCH
6699 NW 2ND AVE, SUITE 315
BOCA RATON, FL 33487**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**200005501182-7
-05/09/02--01072--026
****750.00 ****750.00**

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Mollie Frisch **MOLLIE FRISCH** **4/23/2002**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MFR INVESTMENTS, INC.
6699 N.W. 2nd AVENUE
BOCA RATON, FL 33487

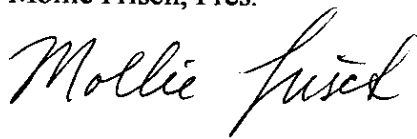
April 23, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

This corporation began in 1996. After some time we stopped receiving the annual forms from the state of Florida. Since we did not receive these forms, we were unaware that there was an annual report to be filed. Due to these facts, we respectfully request that the reinstatement fee be waived. We have enclosed payment for all of the prior years and plan to maintain this annual filing on time. Thank you for your consideration in this matter.

Mollie Frisch, Pres.

A handwritten signature in cursive script that reads "Mollie Frisch". The signature is written in dark ink and is positioned below the typed name.