

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90724 008 ***150.00

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DOCUMENT # P96000081612

1. Entity Name
PUDER-SIEGEL MANAGEMENT CORP.



Principal Place of Business
7361 S. 102ND PLACE
BOYNTON BEACH FL 33437
US

Mailing Address
7361 S. 102ND PLACE
BOYNTON BEACH FL 33437
US

2. Principal Place of Business

7047 PALAZZO REALE
Suite, Apt. #, etc.

3. Mailing Address

7047 PALAZZO REALE
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

BOYNTON BCH FL

City & State

BOYNTON BCH FL

4. FEI Number 65-0700317

Applied For

Not Applicable

Zip

33437

Country

USA

Zip

33437

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PAINTER, JAMES M ESQ
1300 NORTH FEDERAL HWY
SUITE 110
BOCA RATON FL 33432-2848

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME SIEGEL, STEPHEN J
STREET ADDRESS 7361 S. 102ND PLACE
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE ☒ Change ☐ Addition
NAME 7047 PALAZZO REALE
STREET ADDRESS BOYNTON BCH FL
CITY-ST-ZIP 33437

TITLE D ☐ Delete
NAME PUDER, JODY
STREET ADDRESS 7361 S. 102ND PLACE
CITY-ST-ZIP BOYNTON BEACH FL 33437

TITLE ☒ Change ☐ Addition
NAME 7047 PALAZZO REALE
STREET ADDRESS BOYNTON BCH FL
CITY-ST-ZIP 33437

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)