

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90246 011 ***150.00

DOCUMENT # P97000008132

1. Entity Name

SIRENS CORPORATION

Principal Place of Business

1749 EAST HALLANDALE BEAM BLVD #158
HALLANDALE FL 33009

Mailing Address

1749 EAST HALLANDALE BEAM BLVD #158
HALLANDALE FL 33009

00039890



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1749 EAST HALLANDALE BEAM BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#158

City & State

1 HALLANDALE FLORIDA

City & State

4. FEI Number

65-0775405

Applied For

Not Applicable

Zip

33009

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

BOKER, ROBERT

38005 S OCEAN DR, #1414
HOLLYWOOD FL 33019

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 **PTD** ☐ Delete
NAME **BOKOR, ROBERT**
STREET ADDRESS **38005 S OCEAN DR #1414**
CITY-ST-ZIP **HOLLYWOOD FL 33019**

TITLE **PTD** ☒ Change ☐ Addition
NAME **BOKOR ROBERT**
STREET ADDRESS **3800 S OCEAN DR #1414**
CITY-ST-ZIP **HOLLYWOOD FL 33019**

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

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TITLE ☐ Delete
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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 like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BOKOR ROBERT

04/19/2001

Date

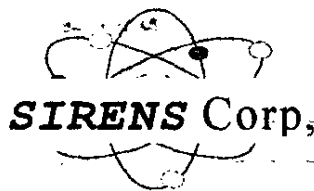
954-456-8675

Daytime Phone #

CR2E034 (10/00)

0615303

Attachment



Doc. #

P97000008132
DOB39890

1749 E. Hallandale Beach Blvd, #158, HALLANDALE, FL, 33009

Hallandale April 15th 2001

FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATION
PO BOX 6327
TALLAHASSEE FLORIDA, 32314

FloridDepOfStatAnnualBusinessReport2001

Dear,

Please find enclosed check # 553 for an amount of \$150.00

I Thank you too, to take notice of some mistakes on your form concerning the address of the corporation and my personal address.

Concerning the address of Sirens Corporation

SIRENS Corp

1749 East. Hallandale Beach Blvd, # 158
HALLANDALE, FL, 33009

On your document the word EART is written

Concerning my personal address

Robert BOKOR

3800 S OCEAN DR # 1414
Hollywood FL, 33019

On your document the number 38005 is written

I am entirely at your disposal for any question.

Sincerely yours.

Robert BOKOR

Attached Document : The Document P97000008132
Check # 553 on Washington Mutual Bank