

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90056 033 ***158.75

DOCUMENT # P97000011582

1. Entity Name
THE GOLDBLATT GROUP, INC.

Principal Place of Business 1800 W. HIBISCUS BLVD. SUITE 130 MELBOURNE FL 32901	Mailing Address 1800 W. HIBISCUS BLVD. SUITE 130 MELBOURNE FL 32901
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3442097	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**NOHRR, DON
 1800 W. HIBISCUS BLVD.
 SUITE 130
 MELBOURNE FL 32901**

7. Name and Address of New Registered Agent

Name SUSAN GOLDBLATT
Street Address (P.O. Box Number is Not Acceptable) 7 RIVER RIDGE DR.
City Rockledge FL Zip Code 32955

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 *Susan Goldblatt* DATE 1/18/2001
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, 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	P GOLDBLATT, SUSAN 430 NORMANDY DRIVE INDIALANTIC FL 32903	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	7 RIVER RIDGE ROAD Rockledge, FL. 32955
<input type="checkbox"/> Delete	V GOLDBLATT, JOE 430 NORMANDY DRIVE INDIALANTIC FL 32903	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	7 RIVER RIDGE ROAD Rockledge, FL. 32955
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<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: *Susan Goldblatt* DATE 1/18/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)