

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90009 034 ***550.00

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DOCUMENT # P97000012949

1. Entity Name
BOCA AUCTION GALLERY, INC.

Principal Place of Business
11 S.E. 3RD STREET
BOCA RATON FL 33432

Mailing Address
~~11 S.E. 3RD STREET~~
~~BOCA RATON FL 33432~~

2. Principal Place of Business

3. Mailing Address **CORPORATE**
2201 NW 22ND BLVD.
Suite, Apt. #, etc. **105**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
BOCA RATON FL

Zip

Country

Zip
33431

Country

FL

4. FEI Number **65-0725270**

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

SHAFFER, ROGER L
2201 CORPORATE BLVD. SUITE 105
BOCA RATON FL 33431

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 *Roger L Shaffer*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE **7-10-01**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
COBOSCO, MICHAEL A
11 S.E. 3RD STREET
BOCA RATON FL 33432

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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: *Michael A Cobosco*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/01

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