## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # 3 P97000014923 Jul 17, 2000 8:00 am Secretary of State ALAN I. NAZAROW, INC. 07-17-2000 90071 006 \*\*\*150.00 rincipal Flace of Business Mailing Address 1681 coral avenue 1681 coral avenue N. LAUDERDALE, FL N. LAUDERDALE, FL 00068772 33068 3. Mailing Address Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0822867 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. AMERILAWYER CHARTERED Street Address (P.O. Box Number is Not Acceptable) 343ALMERIA AVENUE CORAL GABLES, FL #33134 343 ALMERIA AVENUE City Zig 33134 CORAL GABLES 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 PIEGEL & UTRERA, P. A. (NOTE: Registered Agent signature required when reinsta FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. (66/6)☐ Addition Change Delete **PSTD** NAZAROW, ALAN I. STREET ADDRESS 1681 CORAL AVENUE CITY-ST-ZIP ST-ZIP NORTH LAUDERDALE, FL **33068** Change ☐ Addition TITLE NAME STREET ADDRESS SPROWN ... CITY-ST-ZIP ST ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS ... **A**ttanfigg CITY-ST-78 ST ZIP ☐ Change Addition Delete TITLE NAME STREET ADDRESS ADDOLÉS ST ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete . kasargg STREET ADDRESS ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filling 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. - NATURE: RINTED NAME OF SIGNING OFFICER OR DIRECTOR

AHOCMINIA DHP970000 1 DW68772

## 6/28/00

TO WHOM IT CONCERNS:

THE REASON FOR MY LATE FILING IS THAT I NEVER RECEIVED THE ORIGINAL FORM, AND I JUST RECEIVED THIS REPLACEMENT FORM TODAY.

THANK YOU.

SINCERELY,

ALAN NAZARÓW