

FILED

03 MAY -5 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000015850 1. Entity Name THE LASKO FAMILY KOSHER TOURS, INC.			
Principal Place of Business 2699 STIRLING RD. C 405 FORT LAUDERDALE, FL 33312		Mailing Address 2699 STIRLING RD. C 405 FORT LAUDERDALE, FL 33312	
2. Principal Place of Business 3711 SW 47 th Ave., Ste. 204 Davie, FL 33314		3. Mailing Address 3711 SW 47 th Ave., Ste. 204 Davie, FL 33314	
4. FBI Number 85-0743937		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FLORIDA REGISTERED AGENTS, INC. 2699 STIRLING ROAD A-201 FORT LAUDERDALE, FL 33312		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 _____ DATE _____ (Signature, typed or printed name of registered agent, and date of application. (NOTE: Registered Agent signature required when submitting))			
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 NAME STREET ADDRESS CITY-ST-ZIP	DP LASKO, SAMUEL H 2699 STIRLING RD. C-405 FORT LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LASKO, SAMUEL MR. 3711 SW 47 th Ave., Ste. 204 DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP TWERSKY, JONATHAN 2699 STIRLING RD. C-405 FORT LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP TWERSKY, JONATHAN MR. 3711 SW 47 th Ave., Ste. 204 DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LASKO, ARLENE P 2699 STIRLING RD. C-405 FORT LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LASKO, ARLENE MRS. 3711 SW 47 th Ave., Ste. 204 DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VICE CHAIR GLEASON, KEVIN C. MR. 2699 STIRLING RD, STE A-201 FT. LAUDERDALE, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VICE CHAIR GLEASON, KEVIN C. MR. 2699 STIRLING RD, STE A-201 FT. LAUDERDALE, FL 33312
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		KEVIN C. GLEASON, VICE CHAIR DATED: APRIL 30, 2003 PHONE 954-893-7670	

CRREC034 (10/02)

 200018018262
 05/05/03--01096--015 **1500.00

21 514