FILED

## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND

## Apr 07, 2001 8:00 am Secretary of State DOCUMENT # P97000021070 UNIVERSITY PLAZA, INC. 04-07-2001 90004 001 \*\*\*150.00 Principal Place of Business Mailing Address 3990 SHERIDAN STREET 3990 SHERIDAN STREET # TEUUUU SUITE 209 SUITE 209 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 2. Principal Place of Business 3. Mailing Address 3107 STIRLING ROAD Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE SUITE 204 City & State City & State 4. FEI Number Applied For 65-0737597 FL LAUDERDALE Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired USA. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BERMAN, STEVEN B Street Address (P.O. Box Number is Not Acceptable) 3990 SHERIDAN STREET SUITE 209 HOLLYWOOD FL 33021 City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change ☐ Addition TITI F TITLE ☐ Delete 3107 Slitting Road BERMAN, HOWARD B NAME NAME STREET ADDRESS Suite 204 STREET ADDRESS 3990 SHERIDAN STREET Ft Lauderdale, FL 33312 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete ☐ Addition TIT! F TITLE BERMAN, STEVEN B NAME NAME 3107 Stirling Road STREET ADDRESS 3990 SHERIDAN STREET STREET ADDRESS Suite 204 Ft Lauderdale, FL 33312 CITY-ST-ZIP HOLLYWOOD FL 33021 CITY-ST-ZIP ☐ Addition Delete TITLE -TITLE-WEIL, MICHAEL J NAME NAME STREET ADDRESS 3541 N 31ST TERR STREET ADDRESS CITY-ST-7IP HOLLYWOOD FL 33021 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP d with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information apolt 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 a proposered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the second in the same proposered. 13. I hereby certify that the information supp dicated on this report or supplement of the corporation or the receiver or to changed, or on an attachment with an

STEVE BERHAN

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-01