

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000027018

1. Entity Name

SMCHA CORP.

Principal Place of Business

3511 WEST COMMERCIAL BLVD
SUITE 307
FORT LAUDERDALE FL 33309
US

Mailing Address

3511 WEST COMMERCIAL BLVD
SUITE 307
FORT LAUDERDALE FL 33309
US

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 65-0753560

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

DARDASHTI, DAVID
3511 WEST COMMERCIAL BLVD
SUITE 307
FORT LAUDERDALE FL 33309

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE D ☐ Delete
NAME DARDASHTI, DAVID
STREET ADDRESS 3770 CHASE AVE.
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE D ☒ Change ☐ Addition
NAME David Dardashti
STREET ADDRESS 3511 west commercial blvd #307
CITY-ST-ZIP Fort Lauderdale, FL 33309

TITLE D ☒ Delete
NAME BRONSTEIN, HILLEL
STREET ADDRESS 16 WEST 36TH STREET
CITY-ST-ZIP NEW YORK NY 10018

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DARDASHTI, IRENE
STREET ADDRESS 3770 CHASE AVE.
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE D ☒ Change ☐ Addition
NAME Irene Dardashti
STREET ADDRESS 3511 west commercial blvd #307
CITY-ST-ZIP Fort Lauderdale, FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/01

Date

954-714-8200

Daytime Phone #

CR2E034 (10/00)

0251839

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90088 032 ***158.75

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DO NOT WRITE IN THIS SPACE