

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90666 048 ***150.00

DOCUMENT # P97000036672

1. Entity Name

ENTERPRISE REALTY, INC.

Principal Place of Business

**1040 - D WEST PROSPECT RD.
 OAKLAND PARK FL 33309**

Mailing Address

**1040 - D WEST PROSPECT RD.
 OAKLAND PARK FL 33309**

2. Principal Place of Business

4801 S. UNIVERSITY DR

3. Mailing Address

4801 S. UNIVERSITY DR.

Suite, Apt. #, etc.

122

Suite, Apt. #, etc.

122

City & State

DAVIE FL

City & State

DAVIE FL

Zip

33328

Country

BROWARD

Zip

33328

Country

BROWARD

4. FEI Number

65-0747131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CROWN, NANCY E
 7301 WEST PALMETTO PARK ROAD
 SUITE 104-B
 BOCA RATON FL 33433**

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.

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, 2002 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

TITLE	D	<input type="checkbox"/> Delete
NAME	SHERIDAN, HARRY A	
STREET ADDRESS	1040 - D WEST PROSPECT RD.	
CITY-ST-ZIP	OAKLAND PARK FL 33309	
TITLE	D	<input type="checkbox"/> Delete
NAME	KHIMANI, S.A.	
STREET ADDRESS	1040-D WEST PROSPECT RD	
CITY-ST-ZIP	OAKLAND PARK FL 33309	
TITLE	D	<input type="checkbox"/> Delete
NAME	STRATOS, NICK	
STREET ADDRESS	1040-D WEST PROSPECT RD	
CITY-ST-ZIP	OAKLAND PARK FL 33309	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHERIDAN, HARRY A.	
STREET ADDRESS	4801 S. UNIVERSITY DR - SUITE 122	
CITY-ST-ZIP	DAVIE FL 33328	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHIMANI, S.A.	
STREET ADDRESS	4801 S. UNIVERSITY DR. SUITE 122	
CITY-ST-ZIP	DAVIE FL 33328	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRATOS, NICK	
STREET ADDRESS	4801 S. UNIVERSITY DR. SUITE 122	
CITY-ST-ZIP	DAVIE FL 33328	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

HARRY A. SHERIDAN 4/23/02 954-434-8211

Date

Daytime Phone #

CR2E034 (9/01)