

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P97000054585**

1. Entity Name

**LAND OF BELTS, INC.****FILED**  
**Aug 14, 2000 8:00 am**  
**Secretary of State**

08-14-2000 90001 011 \*\*\*150.00

Principal Place of Business

**8000 WEST BROWARD MALL  
UNIT KEY 304R  
PLANTATION FL 33388**

Mailing Address

**8000 WEST BROWARD MALL  
UNIT KEY 304R  
PLANTATION FL 33388**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**APPLIED FOR**

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

**GINZBURG, SHACHER  
8000 W. BROWARD MALL  
UNIT KEY 304R  
PLANTATION FL 33388**

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 \$550.00  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
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 **P** ☐ Delete  
NAME **GINZBURG, SHACHER**  
STREET ADDRESS **8000 W. BROWARD MALL #304R**  
CITY-ST-ZIP **PLANTATION FL 33388**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
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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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

081400

Attachment  
D#P9700054585  
DW 78682

# Memo

**To:** Renewal Section - Division of Corporations

**From:** Shacher Ginzburg

**Subject:** Land of Belts, Inc.- P97000054585

**Date:** August 8, 2000

Enclosed is my company check for \$ 150.00 which represents my corporation annual renewal fee for the year 2000. I originally sent another check into the Division of Corporations at the beginning of April 2000 but it was apparently never processed for it never cleared my checking account.