

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000055942

1. Entity Name

7035 CORPORATION

FILED

Mar 21, 2000 8:00 am  
Secretary of State

03-21-2000 90083 018 \*\*\*150.00

Principal Place of Business

Mailing Address

2300 N.W. CORPORATE BLVD.  
SUITE 222  
BOCA RATON FL 33431

2300 N.W. CORPORATE BLVD.  
SUITE 222  
BOCA RATON FL 33431-7358

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0761295

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GIMELSTOB, HERBERT  
2300 N.W. CORPORATE BLVD.  
SUITE 222  
BOCA RATON FL 33431

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DP	GIMELSTOB, HERBERT	7777 W GLADES RD STE 100	BOCA RATON FL 33434	<input type="checkbox"/> Delete
DV	GIMELSTOB, ELAINE	7777 W GLADES RD STE 100	BOCA RATON FL 33434	<input type="checkbox"/> Delete
VTS	HOPIN, MARC D.	7777 W GLADES RD STE 100	BOCA RATON FL 33434	<input type="checkbox"/> Delete
V	EPSTEIN, WILLIAM L.	7777 W GLADES RD STE 100	BOCA RATON FL 33434	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DP	GIMELSTOB, HERBERT	2300 N.W. CORPORATE BLVD., SUITE 222	BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
DV	GIMELSTOB, ELAINE	2300 N.W. CORPORATE BLVD., SUITE 222	BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VTS	HOPIN, MARC D.	2300 N.W. CORPORATE BLVD., SUITE 222	BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
V	EPSTEIN, WILLIAM L.	2300 N.W. CORPORATE BLVD., SUITE 222	BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

Date

Daytime Phone #

3/15/00

(561) 997-8880