

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90306 049 ***158.75

DOCUMENT # P97000061860

1. Entity Name
AB REAL ESTATE GROUP, INC.



Principal Place of Business
10680 NW 37TH TERRACE
MIAMI FL 33178
US

Mailing Address
10680 NW 37TH TERRACE
MIAMI FL 33178
US

11040101



2. Principal Place of Business
10415 N.W. 56th Terr.
Suite, Apt. #, etc.

3. Mailing Address
10415 N.W. 56th Terr.
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Miami, FL
Zip
33178
Country
USA

City & State
Miami, FL
Zip
33178
Country
USA

4. FEI Number **65-0777469**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MASELLIS, BARTOLOMEO
10680 N.W. 37TH TERRACE
MIAMI FL 33178

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
10415 N.W. 56th Terrace
City **Miami** **FL** Zip Code **33178**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Bartolome Masellis** **04/23/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **MASELLIS, BARTOLOMEO**
STREET ADDRESS **10680 NW 37TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE **DS** ☐ Delete
NAME **MASELLIS, YOLEYDA**
STREET ADDRESS **10680 NW 37TH TERRACE**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **10415 N.W. 56th Terrace**
CITY-ST-ZIP **Miami FL 33178**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **10415 N.W. 56th Terrace**
CITY-ST-ZIP **Miami FL 33178**

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Yoleyda Masellis** **04/23/03** **305-592-0055**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)