

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000079974

1. Entity Name

BEL AIR PROPERTY MANAGEMENT & MAINTENANCE, INC.

**FILED**  
**Mar 03, 2000 8:00 am**  
**Secretary of State**

03-03-2000 90193 045 \*\*\*150.00

Principal Place of Business

Mailing Address

4700 HIATUS RD. STE 143-A  
SUNRISE FL 33351

4700 HIATUS RD. STE 143-A  
SUNRISE FL 33351-7904

2. Principal Place of Business

4700 Hiatus Rd

3. Mailing Address

4700 Hiatus Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 255

Suite 255

City & State

City & State

Sunrise, FL

Sunrise, FL

Zip

Country

33351

USA

Zip

Country

33351

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0782866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

FISHER, TODD  
4700 HIATUS RD, STE 143-A  
SUNRISE FL 33351

7. Name and Address of New Registered Agent

Name

Fisher, Todd

Street Address (P.O. Box Number is Not Acceptable)

4700 Hiatus Rd

Suite 255

City

Sunrise

FL

Zip Code

33351

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

TITLE D ☐ Delete  
NAME FISHER, TODD  
STREET ADDRESS 4700 HIATUS RD, STE 143-A  
CITY-ST-ZIP SUNRISE FL 33351

TITLE D ☒ Delete  
NAME LAWRENCE, CONRAD  
STREET ADDRESS 4700 HIATUS RD, STE 143-A  
CITY-ST-ZIP SUNRISE FL 33351

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/V/S ☒ Change ☐ Addition  
NAME Fisher, Todd  
STREET ADDRESS 4700 Hiatus Rd, Suite 255  
CITY-ST-ZIP Sunrise, FL 33351

TITLE T ☐ Change ☒ Addition  
NAME Deanna Fisher  
STREET ADDRESS 4700 Hiatus Rd, Suite 255  
CITY-ST-ZIP Sunrise, FL 33351

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

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

2/28/00 (954) 741-6335

Date

Daytime Phone #

CR2E034 (9/99)