

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000086695

1. Entity Name
885 REALTY GROUP, INC.

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90053 046 ***150.00

Principal Place of Business

640 E ATLANTIC AVE
SUITE 1
DELRAY BEACH FL 33483

Mailing Address

640 E ATLANTIC AVE
SUITE 1
DELRAY BEACH FL 33483

00038805



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0789066

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

EICHAS, TERRY R
640 E ATLANTIC AVE #1
DELRAY BEACH FL 33483

Name

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

Terry R. Eichas
86 MacFarlane Drive #8H
Delray Beach, FL 33483

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 *Terry R. Eichas*
Signature, typed or printed name of registered agent and title if applicable.

TERRY R EICHAS SEC

4/12/01
DATE

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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	D	<input type="checkbox"/> Delete
NAME	EICHAS, TERRY R	
STREET ADDRESS	640 E ATLANTIC AVE #1	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZEMLIANSKI, DMITRIE	
STREET ADDRESS	640 E ATLANTIC AVE #1	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	D	<input type="checkbox"/> Delete
NAME	RYTIK, VITALI	
STREET ADDRESS	640 E ATLANTIC AVE #1	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Terry R. Eichas*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY R EICHAS

4/12/01
Date

561-272-4201
Daytime Phone #

CR2E034 (10/00)