

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90295 014 ***150.00

DOCUMENT # P97000088487

1. Entity Name

BOCA AIR BROKERAGE, INC.

Principal Place of Business

**3700 AIRPORT RD. SUITE 401
BOCA RATON FL 33431**

Mailing Address

**1900 GLADES RD
STE 245
BOCA RATON FL 33431
US**

2. Principal Place of Business

3700 Airport Road

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Boca Raton, FL

City & State

Zip

33431

Country

USA

Zip

Country

4. FEI Number

49-2471740

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

**BRESLOW, RICHARD H
1900 GLADES RD
STE 245
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, 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 **PD** ☐ Delete
NAME **WANTSHOUSE, MARK**
STREET ADDRESS **3700 AIRPORT**
CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **COB** ☐ Delete
NAME **GREENBERG, MARTIN F**
STREET ADDRESS **1900 GLADES RD STE 245**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **C/D** ☒ Change ☐ Addition
NAME **Greenberg, Martin F.**
STREET ADDRESS **1900 Glades Rd., Suite 245**
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE **S** ☒ Delete
NAME **MCCARRON, LORI**
STREET ADDRESS **1900 GLADES ROAD STET 245**
CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE **S** ☒ Delete
NAME **GREEN, PAMELA**
STREET ADDRESS **1900 GLADES RD STE 245**
CITY-ST-ZIP **BOCA RATON FL 33431**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CFO** ☐ Change ☒ Addition
NAME **Faren, Michael**
STREET ADDRESS **1900 Glades, Rd., Suite 245**
CITY-ST-ZIP **Boca Raton, FL 33431**

TITLE ☐ Delete
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

**MARTIN F. GREENBERG
CHAIRMAN OF THE BOARD
OF DIRECTORS (C/D)**

3-23-01

Date

561-341-8585

Daytime Phone #

CR2E034 (10/00)