

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

02-28-2003 90170 020 ***150.00

DOCUMENT # P97000097375

1. Entity Name
BMA INVESTMENTS, INC.



Principal Place of Business
**2700 W CYPRESS CREEK RD
C-103
FT LAUDERDALE FL 33309
US**

Mailing Address
**2700 W CYPRESS CREEK
C-103
FT LAUDERDALE FL 33309
US**

10029451



2. Principal Place of Business

3696 N. FEDERAL HWY

Suite, Apt. #, etc.

Suite 203

City & State

Fort Lauderdale, FL

Zip
33308

Country
USA

3. Mailing Address

3696 N. FEDERAL HWY

Suite, Apt. #, etc.

Suite 203

City & State

Fort Lauderdale, FL

Zip
33308

Country
USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0799654**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PIOTRKOWSKI, JOEL S
317 - 71ST STREET
MIAMI BEACH FL 33141**

7. Name and Address of New Registered Agent

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

SIGNATURE

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
MARKOFSKY, STANLEY
2700 W CYPRESS CREEK RD C-103
FT LAUDERDALE FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MARK, LOUIS
2700 W CYPRESS CREEK ROAD, C-103
FT LAUDERDALE FL 33309** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
MARKOFSKY, STANLEY
6300 VIA PALLADIUM
BOCA RATON, FL 33433** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MARK, LOUIS
9868 SOUTH CRESCENT VIEW DR.
BOYNTON BEACH, FL 33437** ☒ Change ☐ Addition

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

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

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanley Markofsky, Vice President

1/28/03 954-567-5161

Date

Daytime Phone #

CR2E034 (10/02)