

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000099752

1. Entity Name

PARK PLACE PLACES, INC.

FILED

Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90024 010 ***150.00

Principal Place of Business

Mailing Address

2717 W. CYPRESS CREEK RD.
STE. #808
FT. LAUDERDALE FL 33309
US

2717 W. CYPRESS CREEK RD.
STE. #808
FT. LAUDERDALE FL 33309-1703
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0797419

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

CANTOR, SAMUEL J
1489 W. PALMETTO PARK ROAD, STE. 485
BOCA RATON FL 33486

Name

Samuel J Cantor

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

6700 Broken Sound Pkwy NW
Suite 200

City

Boca Raton

FL

Zip Code
33487

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 fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Delete
NAME PARKER, DAVID L
STREET ADDRESS 2717 W. CYPRESS CREEK RD.
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE D ☐ Change ☒ Addition
NAME Steven G Rose
STREET ADDRESS 2717 W Cypress Creek Rd
CITY-ST-ZIP Ft Lauderdale, FL 33309

TITLE D ☒ Delete
NAME DEBRA PARKER
STREET ADDRESS 2717 W. CYPRESS CREEK RD.
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE D ☐ Change ☒ Addition
NAME Philip Stickles
STREET ADDRESS 2717 W Cypress Creek Rd
CITY-ST-ZIP Ft Lauderdale, FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Deborah Glantz
STREET ADDRESS 2717 W Cypress Creek Rd
CITY-ST-ZIP Ft Lauderdale, FL 33309

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

Date

Daytime Phone #

4/1/00 9549690658

CR2E034 (9/99)