2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000103274

1. Entity Name

C.S. SIMS PROPERTIES, INC.

Principal Place of Business 18083 CLEAR BROOK CIRCLE

BOCA RATON FL 33498

Mailing Address

18083 CLEAR BROOK CIRCLE BOCA RATON FL 33498-1941

| | | | | | - (1 00 1100) (100 1071) (1001) (1001) (1001) | COLOR HALL COLOR (| | | |
|--|---|--|--|--|---|----------------------------|-------------------------|---------------------------|--|
| 2. Principal Place of Business | | 3. Mailing Address | | · | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRIT | TE IN THIS SPA | CE | | |
| City & State | | City & State | | 4. F | Ei Number 65-0801412 | 5 | | plied For t Applicable | |
| Zìp | Country | Zip | Country | 5. (| Certificate of Status Desired | | 3.75 Addi e Required | | |
| | 6. Name and Address of Current R | egistered Agent | | 7. N | lame and Address of New R | egistered Age | ent | | |
| | | | Name | Name | | | | | |
| BERKOWITZ, MYER T 18083 CLEAR BROOK CIRCLE BOCA RATON FL 33498 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | | | | City FL Zip Code | | | | | |
| SIGNATURE . | named entity submits this statement for a Signature, typed or printed name of registered agent an exercise is clinible to scattery to let appoints. | d title if applicable. (NOTE: F | Registered Agent signatur | e required when re | instating) | DATE | | | |
| 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 Sta | | 50.00 | 10. Election Campaign Fir Trust Fund Contribution | | | May Be to Fees | |
| 11. | OFFICERS AND D | IRECTORS | 12. | AD | DITIONS/CHANGES TO OFF | ICERS AND DI | RECTORS | IN 11 | |
| TITLE NAME STREET ADDRESS CITY-SI-ZIP | PST BERKOWITZ, MYER T 18083 CLEAR BROOK CIR BOCA RATON FL 33498-1941 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS MYER 1 1808 BOCA | BURKOWITZ MYER 3 Clear Brook 6 Raton FL 3: | e T. Circle | ₹ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP GOLDSTEIN, DANIEL S 1130 N FLAGLER DRIVE FT LAUDERDALE FL 33304 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 200 | | | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | BERKO 1808 : Boca | Raton FL 334 | !!ñ!E 198-1 94 ! | Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | , | |] Change | Addition | |
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| TITLE NAME STREET ADDRESS | | ☐ Delete | TITLE NAME STREET ADDRESS | | | | Change | Addition | |

Apr 21, 2000 8:00 am Secretary of State

04-21-2000 90032 013 ***150.00

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.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED TOME OF SIGNING OFFICER OR DIRECTOR