## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P97000109040 1. Entity Name LIBERTY REAL ESTATE, INC. 04-26-2001 90259 037 \*\*\*150.00 Principal Place of Business Mailing Address 1501 S.W. SECOND AVENUE 1501 S.W. SECOND AVENUE DANIA FL 33004-4848 DANIA FL 33004-4848 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite. Act. #, ctc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FE! Number Applied For 65-0804463 Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KATZ, ALLEN H PA Street Address (P.O. Box Number is Not Acceptable) 2919 E COMMERCIAL BLVD STE A FORT LAUDERDALE FL 33308 City Zin 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 Florica SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent's guidure required when reinstating) FILE NOW!!! FEE 10 \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See critoria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (10/00) THEF ☐ Delete TILLS ☐ Change Addition NAME ZIMMERMAN, JOHN T NAME STREET ADDRESS 1501 S.W. SECOND AVE. STREET ADDRESS CITY-ST-ZIP CICY - ST. 7!P DANIA FL 33004-4848 BILL Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY -SIF-ZIP TITLE ☐ Dalete 1119 Change Addition 🔲 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 7178 Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tille ☐ Delete 11,178 ☐ Change [] Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - 7IP TITLE Deiete TILLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

13. I horoby cortify 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 earlie, 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 changed, or on an attackment with an address, with all other like empowered.

SIGNING OFFICER OR DIRECTOR