

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0357452 AV

DOCUMENT # P98000011768

1. Entity Name
DSJ REALTY, INC.

04-01-2002 90618 017 ***150.00

Principal Place of Business
**1897 PALM BEACH LAKES BLVD
STE 120
WEST PALM BEACH FL 33409
US**

Mailing Address
**1897 PALM BEACH LAKES BLVD
STE 120
WEST PALM BEACH FL 33409
US**



2. Principal Place of Business

931 Village Blvd

Suite, Apt. #, etc.
905-402

City & State
West Palm Beach, FL

Zip
33409

Country
USA

3. Mailing Address

931 Village Blvd

Suite, Apt. #, etc.
905-402

City & State
West Palm Beach, FL

Zip
33409

Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JASSENOFF, DAVID S
1897 PALM BEACH LAKES BLVD
STE 120
WEST PALM BEACH FL 33409**

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.

SIGNATURE

[Signature] **David Jassenoff**

04 JAN 02

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, 2002 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
PODRECCA, MIA L
1897 PALM BEACH LAKES BLVD., #120
WEST PALM BEACH FL 33409** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
JASSENOFF, DAVID
1897 PALM BEACH LAKES BLVD., #120
WEST PALM BEACH FL 33409** ☐ 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
Mia Jassenoff
931 Village Blvd, Suite 905-402
West Palm Beach, FL 33409** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
David Jassenoff
931 Village Blvd, Suite 905-402
West Palm Beach, FL 33409** ☒ 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

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] **David Jassenoff** **04 JAN 02** **561-682-9033**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)