

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90071 005 ***150.00

DOCUMENT # P98000029329

1. Entity Name
PVC REALTY, INC.

Principal Place of Business
**1650 SOUTH DIXIE HWY. 4TH FLOOR
 BOCA RATON FL 33432**

Mailing Address
**1650 SOUTH DIXIE HWY. 4TH FLOOR
 BOCA RATON FL 33432-7462**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0824528

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**COHEN, PATRICIA V
 2261 CHERRY PALM RD
 BOCA RATON FL 33432**

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, 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, 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

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|----------------------------|----------------------------|---|-----------------------------------|
| TITLE | NAME | TITLE | NAME |
| STPD | COHEN, PATRICIA V | <input checked="" type="checkbox"/> Delete | |
| STREET ADDRESS | 2261 CHERRY PALM RD. | | |
| CITY-ST-ZIP | BOCA RATON FL 33432 | | |
| | | <i>now director only</i> | |
| STPD | HANFINGER, BRUCE | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| STREET ADDRESS | 1650 S DIXIE HWY 4TH FLOOR | | |
| CITY-ST-ZIP | BOCA RATON FL 33432 | | |
| | | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| | | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| | | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
| | | <input type="checkbox"/> Change | <input type="checkbox"/> Addition |
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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: *Patricia V. Cohen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00 561-395-3200

Date

Daytime Phone #

CR2E034 (9/99)