

DOCUMENT # P98000030036

1. Entity Name

EQUITY RIDGE, INC.

Principal Place of Business

400 LESLIE DR., SUITE 215
HALLANDALE FL 33009

Mailing Address

400 LESLIE DR., SUITE 215
HALLANDALE FL 33009-2963

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

ZipCountry

3. Mailing Address

Suite, Apt. #, etc.

City & State

ZipCountry

6. Name and Address of Current Registered Agent

WOLOFSKY, KENNETH
400 LESLIE DR
#215
HALLANDALE FL 33009

Name

Street Address

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)

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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
WOLOFSKY, KENNETH
400 LESLIE DR., SUITE 215
HALLANDALE FL 33009

☐ Delete

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in S indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with or other like empowered.

SIGNATURE: Kenneth W. WOLOFSKY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #