

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2000 8:00 am
Secretary of State

02-28-2000 90174 050 ***150.00

DOCUMENT # P98000034717

1. Entity Name

RANDOLPH J. GINSBERG INTRODUCING BROKERAGE, INC.

Principal Place of Business

Mailing Address

11255 WEST ATLANTIC BLVD
 STE 301
 CORAL SPRINGS FL 33071

11255 WEST ATLANTIC BLVD
 STE 301
 CORAL SPRINGS FL 33321-1713

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0828810

Applied For

Not Applicable

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

GINSBERG, RANDOLPH
~~11255 W. ATLANTIC BLVD~~
~~#301~~
~~CORAL SPRINGS FL 33071~~

Name

Street Address (P.O. Box Number is Not Acceptable)

City

Coral Springs FL

FL

Zip Code

33071

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PSTD
GINSBERG, RANDOLPH J
~~11255 WEST ATLANTIC BLVD~~
~~CORAL SPRINGS FL 33071~~

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

1610 NW 106 lane
Coral Springs FL 33071

☒ Change ☐ Addition

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☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDOLPH GINSBERG

Date

Daytime Phone #

1/27/00

954-721 2860

01/14/99