FILED

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

changed, or on an attachment

SIGNATURE:

## Jul 13, 2001 8:00 am P98000047504 DOCUMENT # **Secretary of State** 1. Entity Name BLOCK 25, INC. 07-13-2001 90109 001 17.880.00 Principal Place of Business Mailing Address 518 BANYAN BLVD 518 BANYAN BLVD 10247 W. PALM BEACH FL 33401 W. PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Shit & UV # Get C DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0874263 Not Applicable Zip Country 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 CORNING, LAWRENCE Street Address (P.O. Box Number is Not Acceptable) **518 BANYAN BLVD** W. PALM BEACH FL 33401 Zip Code FL rpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity su Signature, typed or prin DATE ed Agent signature regu FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CR2E034 (5/01 TITLE ☐ Delete TITLE ☐ Addition 528 (A) Clementis Street NAME CORNING, LAWRENCE NAME STREET ADDRESS 518 BANYAN BLVD STREET ADDRESS CITY-ST-ZIP W. PALM BEACH FL 33401 CITY-ST-ZIP ☐ Change TITLE TITLE Addition elete NAME NAME PLETT, JASON STREET ADDRESS STREET ADDRESS 330 NORTH "K" STREET CITY-ST-ZIP LAKE WORTH FL 33460 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 supplied ental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver at sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if