

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90050 026 ***150.00

DOCUMENT # P98000052061

1. Entity Name

CAPITAL B DEVELOPMENT, INC.

Principal Place of Business

**5950 PALM TRACE LANDINGS DR
 #106
 DAVIE FL 33329**

Mailing Address

**5950 PALM TRACE LANDINGS DR
 #106
 DAVIE FL 33329**

2. Principal Place of Business

**9189 S.W. 49th Place
 Suite, Apt. #, etc.**

3. Mailing Address

**9189 S.W. 49th Place
 Suite, Apt. #, etc.**

City & State

Cooper City, FL.

City & State

Cooper City, FL.

4. FEI Number

65-0841064

Applied For

Not Applicable

Zip

33329

Country

USA

Zip

33328

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KNESZ, BRETT J
 5950 PALM TRACE LANDINGS DRIVE
 #106
 DAVIE FL 33329**

7. Name and Address of New Registered Agent

Name

Same

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

9189 S.W. 49th Place

City

Cooper City

FL

Zip Code

33328

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

4/25/02

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 **D** ☐ Delete
 NAME **KNESZ, BRETT J**
 STREET ADDRESS **5950 PALM TRACE LANDINGS DRIVE**
 CITY-ST-ZIP **DAVIE FL 33329**

TITLE **D** ☒ Delete
 NAME **KNESZ, DEREK**
 STREET ADDRESS **812 NORTHEAST 10 STREET**
 CITY-ST-ZIP **HALLANDALE FL 33009**

TITLE **D** ☒ Delete
 NAME **KNESZ, SHAWN**
 STREET ADDRESS **812 NORTHEAST 10 ST**
 CITY-ST-ZIP **HALLANDALE FL 33009**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President/Director** ☒ Change ☐ Addition
 NAME **KNESZ, Brett J.**
 STREET ADDRESS **9189 S.W. 49th Place**
 CITY-ST-ZIP **Cooper City, FL. 33328**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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 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, director, or 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 of this report.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRETT J. KNESZ
 Date Daytime Phone #

CR2E034 (9/01)