

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000054131

1. Entity Name

CORPORATE DEVELOPMENT PARTNERS, INC.

FILED
Mar 31, 2000 8:00 am
Secretary of State

03-31-2000 90039 041 ***150.00

Principal Place of Business 1048 KANE CONCOURSE, STE.2B BAY HARBOR FL 33154	Mailing Address 1048 KANE CONCOURSE, STE.2B BAY HARBOR FL 33154-2107
---	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5555 ANGLERS AVENUE	3. Mailing Address 5555 ANGLERS AVE
Suite, Apt. #, etc. SUITE 21	Suite, Apt. #, etc. SUITE 21
City & State FT. LAUDERDALE, FL	City & State FT. LAUDERDALE, FL
Zip 33312	Country US

4. FEI Number 65-0852940	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
--	---------------------------------------

6. Name and Address of Current Registered Agent

G GREANER, IVY
1048 KANE CONCOURSE, STE.2B
BAY HARBOR FL 33154

7. Name and Address of New Registered Agent

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 _____ (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	
TITLE PD	<input type="checkbox"/> Delete
NAME GREANER, IVY	
STREET ADDRESS 1048 KANE CONCOURSE, STE.2B	
CITY-ST-ZIP BAY HARBOR FL 33154	
TITLE VSD	<input type="checkbox"/> Delete
NAME GADINSKY, SETH	
STREET ADDRESS 1048 KANE CONCOURSE, STE.2B	
CITY-ST-ZIP BAY HARBOR FL 33154	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS 5555 ANGLERS AVE SUITE 21	
CITY-ST-ZIP FT. LAUDERDALE, FL 33312	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS 5555 ANGLERS AVE SUITE 21	
CITY-ST-ZIP FT. LAUDERDALE, FL 33312	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: Ivy Greaner **3/21/06 (954)-981-4116**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #