## 2000 UNIFORM BUSINESS REPORT (UBR) FILED May 01, 2000 8:00 am Secretary of State DOCUMENT # P98000064293 1. Entity Name PREMIER REAL ESTATE BROKERS, INC. 05-01-2000 90031 030 \*\*\*150.00 Mailing Address Principal Place of Business 10111 FOREST HILL BLVD SUITE 360 iditi FOREST HILL BLVD SUITE 360 WEST PALM BEACH FL 33414-6142 WEST PALM BEACH FL 33414 3. Mailing Address 2. Principal Place of Business S801 LAKE WORTH ROAD 6801 LAKE WORTH ROAD DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. SUJIC #350 sutte # 350 City & State 4. FEI Number Applied For City & State 65-0852507 IF WORTH Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent **BLODIG, GREGORY J ESQ** Street Address (P.O. Box Number is Not Acceptable) GREENSPOON MARDER HIRSCHFELD, ET AL 100 WEST CYPRESS CREEK ROAD SUITE 700 FT LAUDERDALE FL 33309 Zip Code City 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 (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. ☐ Addition Delete TITLE Change : TITLE LINDA M. JOHNJON Johnson, Linda M NAME NAME 15425 WOODBAR COURT STREET ADDRESS 10111 FOREST HILL BLVD SUITE 360 STREET ADDRESS WEST PALM BEACH, FL 33414 CITY-ST-ZIP CITY-ST-7IE WEST PALM BEACH FL 33414 Change . ☐ Addition ☐ Delete TITLE TITLE MICHAR N. JOHNSON JOHNSON, MICHAEL N NAME 15425 WOODMAR COURT STREET ADDRESS 10111 FOREST HILL BLVD SUITE 360 STREET ADDRESS CITY-ST-7IP IEST PALM BEACH, FL 33414 CITY-ST-ZIP WEST PALM BEACH FL 33414 ☐ Addition ☐ Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE 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 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.

Daytime Phone #

CR2E034 (9/99)