

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 14, 2001 8:00 am**  
**Secretary of State**

09-14-2001 90003 010 \*\*\*550.00

**DOCUMENT # P98000065176**

1. Entity Name  
**SYDEL SINGER FAMILY CORPORATION**

Principal Place of Business      Mailing Address  
**1135 KANE CONCOURSE**      **1135 KANE CONCOURSE**  
**BAY HARBOR ISLANDS FL 33154**      **BAY HARBOR ISLANDS FL 33154**

**978641**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

4. FEI Number **65-6854483**      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

**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<b>P</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WALKER, KENNETH</b>	NAME	
STREET ADDRESS	<b>440 EAST 56TH STREET</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>NEW YORK NY 10022</b>	CITY-ST-ZIP	
TITLE	<b>S</b> <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>NELSON, THEODORE R ESQ</b>	NAME	
STREET ADDRESS	<b>1135 KANE CONCOURSE</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>BAY HARBOR ISLANDS FL 33154</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**308**  
**Sept. 10 '01 8685-48**  
 Daytime Phone #

CR2E034 (5/01)

LAW OFFICES  
NELSON & FELDMAN, P.A.

1135 KANE CONCOURSE  
BAY HARBOR ISLANDS, FLORIDA 33154-2025

(305) 865-5716  
Broward Line: (954) 921-2380  
Fax: (305) 865-5710  
E-Mail: andrewf@gate.net

Attachment  
#PA8000005176

978641

Theodore R. Nelson  
Michael K. Feldman  
Andrew E. Feldman

September 10, 2001

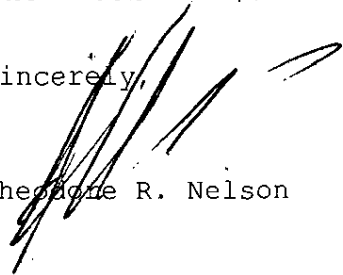
Uniform Business Report  
Division of Corporations  
Florida Department of Revenue  
P. O. Box 1500  
Tallahassee, FL 32302-1500

RE: Sydel Singer Family Corporation  
EIN 65 6854483  
2001 UBR

Dear Friends:

We enclose 2001 UBR and our Trust account check for \$550.00 in payment of the filing fee.

Sincerely,

  
Theodore R. Nelson

TRN:SDF  
Enclosure  
cc: Mr. Kenneth Walker  
Mr. Ed Friedman, CPA