2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P98000068931

1. Entity Name



Apr 14, 2003 8:00 am \$ Secretary of State 204-14-2003 90069 042 555 **FILED**

04-14-2003 90068 043 ***150.00

TONTINE,	, INC.									
Principal Place of Business Mailing Address 3696 N. FEDERAL HWYSTE.101 3696 N. FEDERAL HWY. FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33					1406140	0. 1 1 1 1 1 1 1 1 1), 31 111 83 11 8 811 8 1 1 8 11			
2. Principal P	flace of Business	3. Mailing Address	<u>.</u>							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State		City & State		. ,	4. FEI Number 65-0853282			Applied For Not Applicable		
Zip	Country	Zip	Country		5. Certificate	of Status Desired		5 Addi equired	itional	
	. 6. Name and Address of Curren	t Registered Agent			7. Name and	Address of New R				
	rear and a supplied to the second		Name.			· ·			-	
DANZANSKY, BERNARD 3696 N. FEDERAL HWY, STE 101				Street Address (P.O. Box Number is Not Acceptable)						
	ERDALE FL 33308									
THE ENOBELDALE TE GOODS				City FL Zip Code						
	named entity submits this statement ions of registered agent.	for the purpose of changing	its registered office or	r registere	d agent, or bot	h, in the State of Flo	rida. I am familiar	with, a	ınd accept	
SIGNATURE	Signature, typed or printed name of registered ager	And the Transfer by	OTF: Business d Associations		A		DATE			
		nt and title if applicable. (N	OTE: Registered Agent signat	ure required v	vnen reinstating)					
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department				1	ection Campaign Fin est Fund Contribution			May Be to Fees	
			11,		ADDITIONS/	CHANGES TO OFF	ICEDS AND DIDE	CTOBS	INI 11	
TITLE	OFFICERS ANI	D DIRECTORS Delete	TITLE		ADDITIONS/	CHANGES TO OFF	CENS AND DIRECT		Addition	
NAME	DANZANSKY, BERNARD		NAME	P	D			J	_	
STREET ADDRESS CITY-ST-ZIP	3696 N. FEDERAL HWY , STE 1	101	STREET ADORESS CITY-ST-ZIP							
	FT. LAUDERDALE FL 33308	☐ Delete	TITLE	 			√ Z cr	nange	Addition	
TITLE NAME	VPD Kahan, David	☐ Delete	NAME	NP	5	\mathcal{D}	WE OF	anye		
STREET ADDRESS	3696 N. FEDERAL HWY, STE 10	01	STREET ADDRESS	' '						
CITY-ST-ZIP	FT. LAUDERDALE FL 33308		CITY-ST-ZIP			•-				
TITLE	VPD	Delete	TITLE	l .	_	_	☐ Ch	lange	☐ Addition	
NAME STREET ADDRESS	LEON, SCOTT 3696 N. FEDERAL HWY, STE 10	n1	- NAME - STREET ADDRESS	1 1 2 4 2 C	erren i	TO THE MANAGEMENT OF THE SECOND	دا مداري پهنده مخومهندي در			
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NAME STREET ADDRESS			NAME STREET ADDRESS						ļ	
CITY-ST-ZIP			CITY-ST-ZIP							
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NAME			NAME				٠			
STREET ADDRESS	Λ	•	STREET ADDRESS						ĺ	
CITY-ST-ZIP	/		CITY-ST-ZIP							
12. I hereby of indicated	certify that the information supplied wi on this report or supplemental report	th this filing does not qualify is true and accurate and tha	for the exemption start my signature shall h	ted in Sec	tion 119.07(3)(ame legal effec	i), Florida Statutes. It as if made under o	further certify that bath; that I am an c	t the in	formation or director	

changed, or on an attachment wit

SIGNATURE: