

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90186 033 ***150.00

DOCUMENT # **98000078314**

1. Entity Name

Ixora Property Management, Inc.

Principal Place of Business

Mailing Address

20423 State Rd 7
Suite 160
Boca Raton, Fl. 33498

20423 State Rd 7
Suite 160
Boca Raton, Fl. 33498

2. Principal Place of Business

20423 State Rd 7

3. Mailing Address

20423 State Rd 7

Suite, Apt. #, etc.

#F6, PNB 160

Suite, Apt. #, etc.

#F6, PNB 160

City & State

Boca Raton, Fl.

City & State

Boca Raton, Fl. 33498

4. FEI Number

65-0860326

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

ADD68168

6. Name and Address of Current Registered Agent

Guillermo Ferrer
20423 State Rd 7
Suite 160
Boca Raton, Fl. 33498

7. Name and Address of New Registered Agent

Name **Guillermo Ferrer**

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

11725 Watercrest Lane

City **Boca Raton**

FL

Zip Code

33498

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)

GUILLERMO FERRER

4/26/01

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, 2001 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	PSTD	<input type="checkbox"/> Delete
NAME	Guillermo Ferrer	
STREET ADDRESS	20423 State Rd 7	
CITY-ST-ZIP	Suite 160, Boca Raton, Fl. 33498	
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		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Guillermo Ferrer	
STREET ADDRESS	11725 Watercrest Lane	
CITY-ST-ZIP	Boca Raton, Fl. 33498	
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		
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

GUILLERMO FERRER

4/26/01 (561) 479-2194

CR2E034 (1/1/00)