

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90479 038 ***150.00

DOCUMENT # P98000078361

1. Entity Name

PLAZA RESORTS SOUTH, INC.

Principal Place of Business

871 WEST OAKLAND PARK BLVD.
 FT. LAUDERDALE FL 33311

Mailing Address

871 WEST OAKLAND PARK BLVD.
 FT. LAUDERDALE FL 33311-1731

2. Principal Place of Business

2419 E. COMMERCIAL BLVD.

3. Mailing Address

2419 E. COMMERCIAL BLVD.

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

Suite 100

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33308

Country

USA

Zip

33308

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0863427

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LUBART, LEONARD ESQ.
 GREENSPOON, MARDER, HIRSCHFIELD P.A.
 100 WEST CYRPRESS CREEK ROAD
 FT. LAUDERDALE FL 33309**

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

Signature, typed or printed name of registered agent and title if applicable

(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.

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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	D			<input checked="" type="checkbox"/>
	GROSSMAN, MITCH	871 WEST OAKLAND PARK BLVD.	FT. LAUDERDALE FL 33311	<input checked="" type="checkbox"/>
	D			<input checked="" type="checkbox"/>
	VERILLO, JAMES	871 WEST OAKLAND PARK BLVD.	FT. LAUDERDALE FL 33311	<input checked="" type="checkbox"/>
	D			<input checked="" type="checkbox"/>
	LAMBERT, DANIEL	871 WEST OAKLAND PARK BLVD.	FT. LAUDERDALE FL 33311	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	D			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Grossman, Mitch	2419 E. Commercial, Blvd suite 100	Ft. Lauderdale, FL 33308	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Verillo, James	2419 E. Commercial Blvd. Suite 100	Ft. Lauderdale, FL 33308	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	D			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Lambert, Daniel	2419 E. Commercial Blvd. Suite 100	Ft. Lauderdale, FL 33308	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 #

4/17/00 **9546309449**

CR 1 (03/14) (1998)