

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90409 043 ***150.00

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DOCUMENT # P98000078361

1. Entity Name
PLAZA RESORTS SOUTH, INC.



Principal Place of Business
**652 WEST HALLENDALE CEACH BLVD
FORT LAUDERDALE FL 33309**

Mailing Address
**2419 E COMMERCIAL BLVD
FORT LAUDERDALE FL 33308**

2. Principal Place of Business
652 W. HALLENDALE BEACH BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

100

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

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

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GROSSMAN, MITCH
2419 E COMMERCIAL BLVD SUITE 100
FORT LAUDERDALE FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VERILLO, JAMES
2419 E COMMERCIAL BLVD SUITE 100
FORT LAUDERDALE FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LAMBERT, DANIEL
2419 E COMMERCIAL BLVD SUITE 100
FORT LAUDERDALE FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
OD
HEYDEN, CHRISTINA
2419 E. COMMERCIAL BLVD #100
FORT LAUDERDALE FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Officer
☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)