

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90351 020 ***150.00

DOCUMENT # **P98000078521** ✓

1. Entity Name

100 SAMPLE REALTY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
700 S. Federal Highway

3. Mailing Address
700 S. Federal Highway

Suite, Apt. #, etc.
200

Suite, Apt. #, etc.
200

DO NOT WRITE IN THIS SPACE

City & State

City & State

Boca Raton, FL

Boca Raton, FL

4. FEI Number
65-0864140

Applied For

Not Applicable

Zip
33432

Country
USA

Zip
33432

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Steven Garellek, Esq.

Street Address (P.O. Box Number is Not Acceptable)
c/o Adorno & Zeder, P.A.

700 South Federal Highway, Suite 200

City
Boca Raton

FL

Zip Code
33432

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. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
PSD
Lynn Soreide
700 S. Federal Hwy. #200
Boca Raton, FL 33432

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP&T
Arne Soreide
700 S. Federal Hwy. #200
Boca Raton, FL 33432

TITLE
NAME
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CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Arne Soreide, Vice-Pres. April 29, 2002

Date

Telephone # (561) 393-5660

CR2E034B (12/01)