

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000091843

1. Entity Name

ASSET & TAX MANAGEMENT, INC.

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

05-01-2000 90428 001 ***150.00

Principal Place of Business

15751 SHERIDAN ST. SUITE 124
FT LAUDERDALE FL 33331

Mailing Address

15751 SHERIDAN ST. SUITE 124
FT LAUDERDALE FL 33331-3486

2. Principal Place of Business

8201 Peters Road

3. Mailing Address

15751 Sheridan St.

Suite, Apt. #, etc.

Suite 1000

Suite, Apt. #, etc.

PMB 124

City & State

Plantation FL

City & State

Font Lauderdale FL

Zip

33324

Country

Broward

Zip

33331

Country

Broward

4. FEI Number

65-0871850

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COHEN, MARTIN H
15751 SHERIDAN ST, SUITE 124
FT LAUDERDALE FL 33331

7. Name and Address of New Registered Agent

Name

Martin H. Cohen

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

8201 Peters Road

Suite 1000

City

Plantation

FL

Zip Code

33324

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

Martin H. Cohen

4/20/00

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)

☒

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 PD ☐ Delete
NAME COHEN, MARTIN H
STREET ADDRESS 15751 SHERIDAN ST. #134
CITY-ST-ZIP FT. LAUDERDALE FL 33331

TITLE VPD ☐ Delete
NAME COHEN, JUDITH A
STREET ADDRESS 15751 SHERIDAN ST. #124
CITY-ST-ZIP FT. LAUDERDALE FL 33331

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PP ☒ Change ☐ Addition
NAME COHEN, Martin H
STREET ADDRESS 8201 Peters Road Suite 1000
CITY-ST-ZIP Plantation FL 33324

TITLE VPD ☒ Change ☐ Addition
NAME COHEN, Judith A.
STREET ADDRESS 8201 Peters Road, Suite 1000
CITY-ST-ZIP Plantation, FL 33324

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

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

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

TITLE ☐ Change ☐ 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:

Martin H. Cohen

MARTIN H COHEN, Pres.

Date

Daytime Phone #

CR2E034 (9/99)