2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2000 8:00 am
Secretary of State
06-09-2000 90005 008 ***150.00

DOCUMENT # P98000092860

1. Entity Name

10023 PHASE I, INC.

Principal Place of Business	Mailing Address
% ROY KAHN 3120 HOLIDAY SPRINGS BLVD., STE. 109 MARGATE FL 33063	% ROY KAHN 3120 HOLIDAY SPRINGS BLVD., STE. 109 MARGATE FL 33063-5417

2. Principal Place of Business	3. Mailing Address
100 JEFFERSON AVE	100 JEFFERSON AVE
Suite, Apt. #, etc: 10001	Suite, Apt. #, etc.: 10001
City & State: MIAMI BEACH FL	City & State: MIAMI BEACH, FL
Zip: 33139 Country:	Zip: 33139 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0877548 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KAHN, MORRIS
% ROY KAHN
3120 HOLIDAY SPRINGS BLVD., STE. 109
MARGATE FL 33063

7. Name and Address of New Registered Agent

Name: KAHN, MORRIS
Street Address (P.O. Box Number is Not Acceptable): 100 JEFFERSON AVE STE 10001
City: MIAMI BEACH FL Zip Code: 33139

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: Morris Kahn — MORRIS KAHN DATE: 4/28/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KAHN, MORRIS 3210 HOLIDAY SPRINGS BLVD. STE 109 MARGATE FL 33063 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT KAHN, AUDREY 100 JEFFERSON AVE STE 10001 MIAMI BEACH, FL 33139 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST KAHN, MORRIS 3120 HOLIDAY SPRINGS BLVD, STE 109 MARGATE FL 33063 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100 JEFFERSON AVE STE 10001 MIAMI BEACH, FL 33139 ☑ 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
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CR2E034 (9/99)

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: Morris Kahn 4/28/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #