

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000C 92860

10023 PHASE I, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90246 037 ***150.00

1. Principal Place of Business
% ROY KAHN
3120 HOLIDAY SPRINGS BLVD., STE. 109
MARGATE FL 33063

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

2. Principal Place of Business
100 JEFFERSON AVE
Suite, Apt. #, etc.
10001

3. Mailing Address
100 JEFFERSON AVE
Suite, Apt. #, etc.
10001

City & State
MIAMI BEACH FL

City & State
MIAMI BEACH, FL

4. FEI Number 65-0877548
Applied For
Not Applicable

Zip 33139 Country
33139

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 Kahan Morris Kahan 4/23/01 4/23/01
Morris Kahan Morris Kahan
(NOTE: Registered Agent signature required when reinstalling)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☒
10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
P	☐ Delete	TITLE	PRESIDENT ☒ Change ☐ Addition
KAHN, MORRIS		NAME	KAHN, AUDREY
3210 HOLIDAY SPRINGS BLVD. STE 109		STREET ADDRESS	100 JEFFERSON AVE STE 10001
MARGATE FL 33063		CITY-ST-ZIP	MIAMI BEACH, FL 33139
ST	☐ Delete	TITLE	☒ Change ☐ Addition
KAHN, MORRIS		NAME	
3120 HOLIDAY SPRINGS BLVD, STE 109		STREET ADDRESS	100 JEFFERSON AVE STE 10001
MARGATE FL 33063		CITY-ST-ZIP	MIAMI BEACH, FL 33139
	☐ Delete	TITLE	☐ Change ☐ Addition
		NAME	
		STREET ADDRESS	
		CITY-ST-ZIP	
	☐ Delete	TITLE	☐ Change ☐ Addition
		NAME	
		STREET ADDRESS	
		CITY-ST-ZIP	
	☐ Delete	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 furnished 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, signed, or on an attachment with an address, with all other like empowered.
Signature: Morris Kahan Morris Kahan 4/23/01 4/23/01
Morris Kahan Morris Kahan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR