

# 2001 UNIFORM BUSINESS REPORT (UBR)

3/14

FILED

Apr 04, 2001 8:00 am  
Secretary of State

03-14-2001 90502 045 \*\*\*158.75

DOCUMENT # P990000011858

1. Entity Name

HENRY REED, INC.

Principal Place of Business

23248-G ISLAND VIEW  
BOCA RATON FL 33433

Mailing Address

23248-G ISLAND VIEW  
BOCA RATON FL 33433

2. Principal Place of Business

321 N. UNIVERSITY DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

R-1

City & State

PLANTATION, FL

City & State

4. FEI Number

65-0975838

Applied For

Not Applicable

Zip

33324

Country

USA

Zip

Country

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

REED, HENRY  
23248-G ISLAND VIEW  
BOCA RATON FL 33433

7. Name and Address of New Registered Agent

Name

WALDMAN, HENRY

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

321 NORTH UNIVERSITY DR #R1

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

Hollis Rispler

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

(NOTE: Registered agent signature required when reinstating)

DATE

3-27-01

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, 2001 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  
NAME REED, HENRY  
STREET ADDRESS 23248-G ISLAND VIEW  
CITY-ST-ZIP BOCA RATON FL 33433

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PRESIDENT  
NAME WALDMAN, HENRY  
STREET ADDRESS 321 NORTH UNIVERSITY DRIVE #R1  
CITY-ST-ZIP PLANTATION FLA 33324

☒ Change ☐ Addition

TITLE VICE PRESIDENT  
NAME HOLLIS RISPLER  
STREET ADDRESS 321 NORTH UNIVERSITY DR #R1  
CITY-ST-ZIP PLANTATION, FLA. 33324

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/12/01 954-423-2662

CR2E034 (10/00)