

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012517

1. Entity Name

NUMBER ONE REAL ESTATE OF AMERICA, INC.

FILED**Jan 08, 2001 8:00 am**
Secretary of State

01-08-2001 90039 007 ***150.00

Principal Place of Business

Mailing Address

1000 S. FEDERAL HIGHWAY, SUITE 200
DEERFIELD BEACH FL 334411000 S. FEDERAL HIGHWAY, SUITE 200
DEERFIELD BEACH FL 33441

2. Principal Place of Business

3. Mailing Address

100 S. MILITARY TRAIL
Suite, Apt. #, etc.
19100 S. MILITARY TRAIL
Suite, Apt. #, etc.
19

DO NOT WRITE IN THIS SPACE

City & State
DEERFIELD BEACH, FL
Zip
33442
Country
FLORIDACity & State
DEERFIELD BEACH, FL
Zip
33442
Country
FLORIDA

4. FEI Number 65-0917513

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

KONIGSBURG, LEONARD
1000 S FEDERAL HWY, SUITE 200
DEERFIELD BEACH FL 33441

7. Name and Address of New Registered Agent

Name
LEONARD KONIGSBURG
Street Address (P.O. Box Number is Not Acceptable)
100 S. MILITARY TRAIL
#19
City
DEERFIELD BEACH, FL
Zip Code
33442

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, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/3/01

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
KONIGSBURG, LEONARD
1000 S FEDERAL HWY, SUITE 200
DEERFIELD BEACH FL 33441 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KONIGSBURG, LEONARD
1000 S FEDERAL HWY, SUITE 200
DEERFIELD BEACH FL 33441 ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
100 S. MILITARY TRAIL #19
DEERFIELD BEACH, FL 33442TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
100 S. MILITARY TRAIL #19
DEERFIELD BEACH, FL 33442TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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)(f), 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 #

1/03/01 (888) 426-6800

CR2E034 (10/00)