2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State
05-03-2001 90953 036 ***150.00

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DOCUMENT # P99000025960

1. Entity Name
CRAFTSMAN MALL, INC.

Principal Place of Business	Mailing Address
235 LINCOLN ROAD. PH 400 MIAMI BEACH FL 33139	235 LINCOLN ROAD. PH 400 MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
141 NE 3RD AVE	141 N.E. 3rd AVE
Suite, Apt. #, etc.: 7th FLOOR	Suite, Apt. #, etc.: 7th Floor
City & State: MIAMI FLORIDA	City & State: MIAMI FLORIDA
Zip: 33132 Country: U.S.A	Zip: 33132 Country: U.S.A.

4. FEI Number 65-0968027 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KLEIN, SHAMIRA
C/O BERMAN WOLFE & RENNERT, P.A.
100 SE 2ND ST., STE 3500 NATIONSBANK TOWER
MIAMI FL 33131-2130

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 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, 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SKLAR, ARI 235 LINCOLN ROAD, PH 400 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 141 NE 3RD Ave, 7th FLOOR MIAMI FL 33132
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SKLAR, NEIL 235 LINCOLN ROAD, PH 400 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 141 N.E 3RD Ave, 7th FLOOR MIAMI FL 33132
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSNER, MYRON 235 LINCOLN ROAD, PH 400 MIAMI BEACH FL 33139	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 141 NE 3RD AVE, 7th FLOOR MIAMI FL 33132
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/00)

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: _____ 4/26/01 305-379-0007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #