

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2003 8:00 am
Secretary of State

06-09-2003 90111 047 ***150.00

DOCUMENT # P99000028389

1. Entity Name
COORDINATED REAL ESTATE SERVICES, INC.



Principal Place of Business
**900 SW 7TH STREET
BOCA RATON FL 33486**

Mailing Address
**900 SW 7TH STREET
BOCA RATON FL 33486**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0904490**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHERNIN, ALAN
900 SW 7TH STREET
BOCA RATON FL 33486**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	CHERNIN, ALAN	
STREET ADDRESS	900 SW 7TH STREET	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CHERNIN, VICKI	
STREET ADDRESS	900 SW 7TH STREET	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 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 #

CR2E034 (10/02)

Attachment



90139004
9990000628389

COORDINATED REAL ESTATE SERVICES, INC.

900 SOUTHWEST 7TH STREET BOCA RATON, FLORIDA 33486 Tel.: (561) 338-9047 Fax: (561) 395-7035

June 4 2003

To: Florida Dept. of State, Division of Corporations

Re: Coordinated Real Estate Services, Inc. FEI 65-0904490

To Whom It May Concern,

Please find attached my check #1558 and UBR for 2003. I just got out of the hospital after having major surgery to remove a grapefruit-sized cyst attached to my kidney and unfortunately was unable to send this in. I apologize profusely for my error and hope you will accept my filing. Thank you very much for your understanding.

Sincerely,

A handwritten signature in black ink, appearing to read 'Alan Chernin', with a long horizontal flourish extending to the right.

ALAN CHERNIN