

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90042 003 ***550.00

DOCUMENT # P99000036233

1. Entity Name
FAIRWAY INTERNATIONAL BROKERAGE, INC.



Principal Place of Business: 2511 PONCE DE LEON BLVD., STE. 205 CORAL GABLES FL 33134
 Mailing Address: 2511 PONCE DE LEON BLVD., STE. 205 CORAL GABLES FL 33134

A0075198



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **318 INDIAN TRACE**
 3. Mailing Address: **318 INDIAN TRACE**

Suite, Apt. #, etc.: **#110**

City & State: **WESTON, FL**

4. FEI Number: **65-0925529**
 Applied For: Not Applicable

Zip: **33326** Country: **USA**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

REISMAN, JEROME S
 2511 PONCE DE LEON BLVD., STE. 205
 CORAL GABLES FL 33134

Name: **FRANK GRANIT**
 Street Address (P.O. Box Number is Not Acceptable): **4284 DIAMOND TERRACE**
 City: **WESTON** FL Zip Code: **33331**

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: *Frank Granit* DATE: **09-01-00**

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DP	EISENBERG, NEIL	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	3975 N.W. 75TH TERRACE	STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33319	CITY-ST-ZIP	
DV	REISMAN, STUART R	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	13940 S.W. 102 AVENUE	STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33176	CITY-ST-ZIP	
DST	GRANIT, FRANK	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	4284 DIAMOND TERRACE	STREET ADDRESS	
CITY-ST-ZIP	WESTON FL 33331	CITY-ST-ZIP	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Delete		<input type="checkbox"/> Change	<input type="checkbox"/> 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 files empowered.

SIGNATURE: *Frank Granit*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **09-01-00**

Daytime Phone #: **(954) 560-3788**

CR2E034 (5/00)