2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2000 8:00 am
Secretary of State
06-09-2000 90005 024 ***150.00

DOCUMENT # P99000042820
Entity Name

AIM DANIA, INC.

Principal Place of Business | Mailing Address

2. Principal Place of Business	3. Mailing Address
1210 STIRLING RD	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
1A	
City & State	City & State
DANIA, FL	
Zip / Country	Zip / Country
33140	

DO NOT WRITE IN THIS SPACE

4. FEI Number: 11-3535364 — Applied For / Not Applicable

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
	Name: IZAK ASHKENAZY
	Street Address (P.O. Box Number is Not Acceptable): 580 COLLINS AVENUE
	City: MIAMI — FL — Zip Code: 33140

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: X — Signature of new registered agent and title if applicable — (NOTE: Registered Agent signature required when adding/changing) — DATE

This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See options on back) ☐	FILE NOW!!! FEE IS $150.00 After MAY 1, 2000 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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D IZAK ASHKENAZY 580 DECOR AVENUE CONWOY, NY 11559	☐ Change ☒ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/99)

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: X — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000042820

Name

Aim Dania, Inc.

Principal Place of Business | Mailing Address

Attachment

C0093658

DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
210 Stirling Rd.	Same
Suite, Apt. #, etc. 1A	Suite, Apt. #, etc.
City & State Dania FL	City & State
Zip 33140 Country	Zip Country

4. FEI Number 11-3535364 ☐ Applied For ☐ Not Applicable

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

Name Izzy Ashkenazy

Street Address (P.O. Box Number is Not Acceptable) 5225 Collins Avenue

City Miami FL Zip Code 33140

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.

X

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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, 2000 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

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
☐ Delete ADDRESS ST-ZIP		TITLE P/D NAME Izzy Ashkenazy STREET ADDRESS 580 Ocean Avenue CITY-ST-ZIP Lawrence, NY 11559	☐ Change ☒ Addition
☐ Delete ADDRESS ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Delete ADDRESS ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Delete ADDRESS ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #