

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90035 026 ***150.00

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DOCUMENT # P99000042866

1. Entity Name
BALLYDINE INVESTMENTS LIMITED, INC.



Principal Place of Business
**1500 SOUTH OCEAN BLVD
S-305
BOCA RATON FL 33432**

Mailing Address
**1500 SOUTH OCEAN BLVD
S-305
BOCA RATON FL 33432**



2. Principal Place of Business
**ENTERPRISE HOUSE
Suite, Apt. #, etc.
CENTURY COURT**

3. Mailing Address
**477 MADISON AVE
Suite, Apt. #, etc.
24th FLOOR**

☒ CHECK HERE IF MAKING CHANGES

City & State
UPPER GROVES STREET

City & State
NEW YORK, NY

4. FEI Number **58-2616342**

Applied For
Not Applicable

Zip Country
COUNTY DRAIN FLORIDA

Zip Country
10022 USA

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

6. Name and Address of Current Registered Agent

**NRAI SERVICES, INC.
526 E. PARK AVE.
TALLAHASSEE FL 32301**

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

SIGNATURE _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	PD GREENFIELD, MARVIN E 1500 S. OCEAN BLVD. UNIT S-305 BOCA RATON FL 33432	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHRISTOPHER BATESON 18 HOPE STREET DOUGLAS, ISLE OF MAN, UK IM1 1AQ	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GREENFIELD, BARBARA 1500S. OCEAN BLVD UNIT S-305 BOCA RATON FL 33432	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IAN MACKENZIE 18 HOPE STREET DOUGLAS, ISLE OF MAN, U.K. IM1 1AQ	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KARDOS, JUDITH 477 MADISON AVE NEW YORK NY 10022	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUBIN, FELICIA 25TH EAST 65ST NEW YORK NY 10021	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SP MARVIN GREENFIELD 1500 S. OCEAN BLVD BOCA RATON, FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JVP BARBARA GREENFIELD 1500 S. OCEAN BLVD. BOCA RATON, FL 33432	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/03 561-391-6528
Date Daytime Phone #

CR2E034 (10/02)