

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 15, 2002 8:00 am**  
**Secretary of State**

05-15-2002 90082 044 \*\*\*150.00

DOCUMENT #P99000043523

1. Entity Name

BRESLOW ENTERPRISES, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2761 Ocean Club Boulevard

Suite, Apt. #, etc.

Suite 203

City & State

Hollywood, Florida

Zip

33019

Country

3. Mailing Address

2761 Ocean Club Boulevard

Suite, Apt. #, etc.

Suite 203

City & State

Hollywood, Florida

Zip

33019

Country

4. FEI Number

65-0924649

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Breslow, Mitchell

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

2761 Ocean Club Boulevard

Suite 203

City

Hollywood

FL

Zip Code  
33019

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) ☒

**January 1 - May 1: Fee is \$150.00**  
**After May 1: Fee is \$550.00**  
**Amended UBR is \$61.25**  
**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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PST	Breslow, Mitchell	2761 Ocean Club Boulevard #203	Hollywood, Florida 33019

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Mitchell Breslow*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mitchell Breslow

Date

4/29/02

Daytime Phone #

954-921-6959

CR2E034B (12/01)