2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000043572 May 04, 2000 8:00 am 1. Entity Name THE GALLERIA COLLECTION, INC. Secretary of State 05-04-2000 90094 043 ***163.75 Principal Place of Business Mailing Address 101 SOUTH ATLANTIC BLVD. 101 SOUTH ATLANTIC BLVD. FORT CANDERDALE FL 33316 FORT LAUDERDALE FL 33316-1505 2. Principal Place of Business 3. Mailing Address 2572 8, Sunrise Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State City & State Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DAY, & ROBERT 101 SOUTH ATLANTIC BLVD. FORT LAUDERDALE FL 33316 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Election Campaign Financia Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. . Robert Day Blud OFFICERS AND DIRECTORS 12. Paul A.McRae Hesident - Change 2572 E. Sunrise Blud. TITLE TITLE 101 S. Ocean NAME NAME int Lauderdale, PC 33304 STREET ADDRESS STREET ADORESS Fort Lauderdas FL 33316 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY_ST-ZIP_ ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information out 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the in ormation supplied supplied indicated on this report of the corporation or the changed, or on an atta