

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State
 05-12-2002 90608 006 ***150.00

DOCUMENT # P99000054789

1. Entity Name
MAS REAL ESTATE CORP.

Principal Place of Business

**7900 GLADES ROAD SUITE 440
 BOCA RATON FL 33434**

Mailing Address

**7900 GLADES ROAD SUITE 440
 BOCA RATON FL 33434**

2. Principal Place of Business

2424 N. Federal Hwy

Suite, Apt. #, etc.
Suite 311

City & State
Boca Raton FL

Zip
33431

Country
Palm Beach

3. Mailing Address

2424 N. Federal Hwy

Suite, Apt. #, etc.
Suite 311

City & State
Boca Raton, FL

Zip
33431

Country
Palm Beach



DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0932538

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MONTANTI, VINCENT J
 7900 GLADES ROAD SUITE 440
 BOCA RATON FL 33434**

7. Name and Address of New Registered Agent

Name
MONTANTI, VINCENT J.

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

2424 FEDERAL HWY

SUITE 311

City
BOCA RATON

FL

Zip Code
33431

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) ☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 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

11. OFFICERS AND DIRECTORS

TITLE
D
 NAME
MONTANTI, VINCENT J
 STREET ADDRESS
7900 GLADES ROAD STE 410
 CITY-ST-ZIP
BOCA RATON FL 33434

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
MONTANTI, VINCENT J.
 NAME
2424 FEDERAL HWY, SUITE 311
 STREET ADDRESS
BOCA RATON, FL 33431
 CITY-ST-ZIP

☒ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ 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 like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-02 **561-620-9260**
 Date Daytime Phone #

CR2E034 (9/01)