

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000057569

1. Entity Name
TITLE CLOSERS, INC.

Principal Place of Business

450 N PARK RD
STE 502
HOLLYWOOD FL 33021
US

Mailing Address

450 N PARK RD
STE 502
HOLLYWOOD FL 33021
US

2. Principal Place of Business

2828 CORAL WAY

3. Mailing Address

2828 CORAL WAY

Suite, Apt. #, etc.

SUITE 308

Suite, Apt. #, etc.

SUITE 308

City & State

MIAMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33145

Country

USA

Zip

33145

Country

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NURIELI, EDDIE
139 NE 1ST AVENUE
HALLANDALE FL 33009

Name

RICHARD S GENDLER

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

2828 CORAL WAY

SUITE 308

City

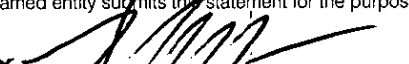
MIAMI

FL

Zip Code

33145

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  RICHARD S GENDLER PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

DATE

4-27-01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD NURIELI, EDDIE 139 NE 1ST AVENUE HALLANDALE FL 33009	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD GENDLER, RICHARD S. 2828 CORAL WAY SUITE 308 MIAMI FL 33145	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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

RICHARD S GENDLER

Date

4-27-01

Daytime Phone #

(305) 444-1533

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90202 033 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0937665

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

CR2E034 (10/00)