

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State
 05-16-2002 90003 028 ***150.00

DOCUMENT # P99000060148

1. Entity Name
10061 REAL ESTATE GROUP, INC.

Principal Place of Business

**10061 N.W. 1ST COURT
 PLANTATION FL 33324**

Mailing Address

**10061 N.W. 1ST COURT
 PLANTATION FL 33324**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12277 S.W. 55th St.

Suite, Apt. #, etc.

Suite 901

City & State

Cooper City, FL

Zip

33380

Country

U.S.A.

3. Mailing Address

12277 S.W. 55th Street

Suite, Apt. #, etc.

Suite 901

City & State

Cooper City

Zip

33330

Country

4. FEI Number

65-0938673

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GABLE, MICHAEL P
 4000 HOLLYWOOD BLVD.
 SUITE 735 SOUTH TOWER
 HOLLYWOOD FL 33021-6755**

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.

SIGNATURE

Signature, name 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** ☐ Delete
NAME **FERNANDEZ, NELSON**
STREET ADDRESS **10061 N.W. 1ST COURT**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **D** ☐ Delete
NAME **FERNANDEZ, ALBERTO**
STREET ADDRESS **10061 N.W. 1ST COURT**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE **D** ☐ Delete
NAME **GIL, ALBERTO**
STREET ADDRESS **10061 N.W. 1ST COURT**
CITY-ST-ZIP **PLANTATION FL 33324**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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

Date

Daytime Phone #

4/1/02 (954) 693-9900

CR2E034 (9/01)