

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000072215

1. Entity Name

DENBAR INVESTMENTS GROUP, INC.

FILED
Apr 20, 2001 8:00 am
Secretary of State

04-20-2001 90170 049 ***150.00

Principal Place of Business

5313 COLLINS AVENUE
SUITE 408
MIAMI BEACH FL 33140

Mailing Address

5313 COLLINS AVENUE
SUITE 408
MIAMI BEACH FL 33140

2. Principal Place of Business

1550 NE MIAMI GARDENS

3. Mailing Address

Suite, Apt. #, etc.

Suite 500

City & State

N. MIAMI BEACH

City & State

Zip
33179

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0964132

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOLLINGER, ROBERT
5313 COLLINS AVENUE
SUITE 408
MIAMI BEACH FL 33140

7. Name and Address of New Registered Agent

Name ITZHAK ORGAD
Street Address (P.O. Box Number is Not Acceptable)
1550 NE MIAMI GARDENS DR #500
N. MIAMI BEACH,
City FL Zip Code 33179

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, 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

TITLE PD
NAME BOLLINGER, ROBERT ☒ Delete
STREET ADDRESS 5313 COLLINS AVENUE SUITE 408
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE VSD
NAME NURIELI, EDDIE ☒ Delete
STREET ADDRESS 139 NE 21ST AVENUE
CITY-ST-ZIP HALLANDALE FL 33009

TITLE VPTD
NAME DAVIDSON, RON ☐ Delete
STREET ADDRESS 1550 NE MIAMI GARDENS DR STE 500
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179

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 PD ☐ Change ☒ Addition
NAME ITZHAK ORGAD
STREET ADDRESS 1550 NE MIAMI GARDENS DR #500
CITY-ST-ZIP N. MIAMI BEACH, FL 33179

TITLE VPD ☐ Change ☒ Addition
NAME URI 2. EVRON
STREET ADDRESS 1550 NE MIAMI GARDENS DR #500
CITY-ST-ZIP N. MIAMI BEACH, FL 33179

TITLE VPTSD ☒ Change ☐ Addition
NAME RON DAVIDSON
STREET ADDRESS 1550 NE MIAMI GARDENS DR #500
CITY-ST-ZIP N. MIAMI BEACH, FL 33179

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

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

TITLE ☐ Change ☐ Addition
NAME
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

RON DAVIDSON

Date

Daytime Phone #

4.6.01

305/949-0014

CR2E034 (10/00)

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