

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000079396

1. Entity Name  
**FACTORYHOMES, INC.**

**FILED**  
**May 11, 2001 8:00 am**  
**Secretary of State**

05-11-2001 90294 033 \*\*\*150.00

Principal Place of Business

7183 43RD TRAIL N.  
RIVIERA BEACH FL 33404

Mailing Address

7183 43RD TRAIL N.  
RIVIERA BEACH FL 33404

00031018



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2765 10TH AVE N  
Suite, Apt. #, etc.  
49

3. Mailing Address

2765 10TH AVE N  
Suite, Apt. #, etc.  
49

City & State

LAKE WORTH, FL  
Zip 33461 Country PB

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4. FEI Number NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

RUBIN, PAUL B  
3065 FOREST HILL BLVD  
WEST PALM BEACH FL 33406

7. Name and Address of New Registered Agent

Name PAUL B. RUBIN  
Street Address (P.O. Box Number is Not Acceptable)  
2765 10TH AVE N #49  
City LAKE WORTH FL Zip 33461

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 D ☐ Delete  
NAME RUBIN, PAUL G  
STREET ADDRESS 3065 FOREST HILL BLVD  
CITY-ST-ZIP WEST PALM BEACH FL 33408

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 D.P.C. ☒ Change ☐ Addition  
NAME PAUL B. RUBIN  
STREET ADDRESS 2765 10TH AVE N #49  
CITY-ST-ZIP LAKE WORTH, FL 33461

TITLE V.T.S. ☐ Change ☒ Addition  
NAME LYNN D. RUBIN  
STREET ADDRESS 2765 10TH AVE N #49  
CITY-ST-ZIP LAKE WORTH, FL 33461

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

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

Date

Daytime Phone #

CR2E034 (10/00)