

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000101273

1. Entity Name

QUORUM REAL ESTATE, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90030 001 ***300.00

Principal Place of Business

Mailing Address

2255 GLADES ROAD
SUITE 236W
BOCA RATON FL 33431

2255 GLADES ROAD
SUITE 236W
BOCA RATON FL 33431-7391



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2700 N. Military Trail

3. Mailing Address

2700 N. Military Trail

Suite, Apt. #, etc.

Suite 220

Suite, Apt. #, etc.

Suite 220

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

33431-6394

Country

USA

Zip

33431-6394

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

GOLDSTEIN, MARK B
2255 GLADES ROAD
SUITE 236W
BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

Goldstein, Mark B.

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

2700 N. Military Trail

Suite 220

City

Boca Raton,

FL

Zip Code

33431-6394

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

Mark B. Goldstein

3/21/00

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, 2000 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 **GOLDSTEIN, MARK B**
STREET ADDRESS **2255 GLADES ROAD SUITE 236W**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ Delete
NAME **CISNEROS, EMMA**
STREET ADDRESS **2255 GLADES ROAD SUITE 236W**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ Delete
NAME **VARGAS, VICTOR**
STREET ADDRESS **2255 GLADES ROAD SUITE 236W**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ Delete
NAME **FEAGAS, JOSE LUIS**
STREET ADDRESS **2255 GLADES ROAD SUITE 236W**
CITY-ST-ZIP **BOCA RATON FL 33431**

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** ☒ Change ☐ Addition
NAME **Goldstein, Mark B.**
STREET ADDRESS **2700 N. Military Trail, Suite 220**
CITY-ST-ZIP **Boca Raton, FL 33431-6394**

TITLE **D** ☒ Change ☐ Addition
NAME **Cisneros, Emma**
STREET ADDRESS **2700 N. Military Trail, Suite 220**
CITY-ST-ZIP **Boca Raton, FL 33431-6394**

TITLE **D** ☒ Change ☐ Addition
NAME **Vargas, Victor**
STREET ADDRESS **2700 N. Military Trail, Suite 220**
CITY-ST-ZIP **Boca Raton, FL 33431-6394**

TITLE **D** ☒ Change ☐ Addition
NAME **Feagas, Jose Luis**
STREET ADDRESS **2700 N. Military Trail, Suite 220**
CITY-ST-ZIP **Boca Raton, FL 33431-6394**

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:

Mark B. Goldstein

3/21/00

(561) 989-9955

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)