

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000101751

1. Entity Name

FOSTER & FOSTER REALTY & ASSOCIATES, INC.

FILED
Sep 13, 2000 8:00 am
Secretary of State

09-13-2000 90058 002 ***550.00

Principal Place of Business

401 OCEAN DRIVE #806
 MIAMI BEACH FL 33139

Mailing Address

401 OCEAN DRIVE #806
 MIAMI BEACH FL 33139

2. Principal Place of Business

3240 SW 192nd Ave

3. Mailing Address

3240 SW 192nd Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIRAMAR FL

City & State

MIRAMAR FL

4. FEI Number

65-0962915

Applied For

Not Applicable

Zip

33029

Country

USA

Zip

33029

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FOSTER, DENNIS

401 OCEAN DRIVE #806
 MIAMI BEACH FL 33139

3240 SW 192nd Ave
 MIRAMAR, FL 33029

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]

DENNIS FOSTER

9/9/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 ☐ Delete
 NAME D
 STREET ADDRESS 401 OCEAN DRIVE #806
 CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ Delete
 NAME D
 STREET ADDRESS 401 OCEAN DRIVE #806
 CITY-ST-ZIP MIAMI BEACH FL 33139

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 ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 3240 S W 192nd Ave
 CITY-ST-ZIP MIRAMAR FL 33029

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 3240 SW 192nd Ave
 CITY-ST-ZIP MIRAMAR FL 33029

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

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/00

305-559-4900

Date

Daytime Phone #

CR2E034 (5/00)