2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000102701**

Country

222 LAKEVIEW AVE., 17TH FLOOR WEST PALM BEACH FL 33401

6. Name and Address of Current Registered Agent

1. Entity Name §

City & State

REGSERV CORP.

Zip

TOWN CENTER I OFFICE EQUITY CORPORATION

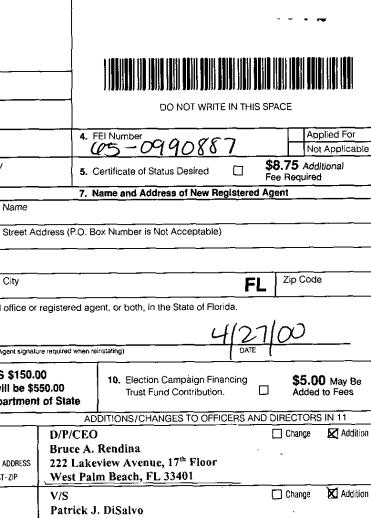
Principal Place of Business Mailing Address 222 LAKEVIEW AVE.,17TH FLOOR 200 LAKEVIEW AVE., 17TH FLOOR PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Zip

FILED May 04, 2000 8:00 am Secretary of State

05-04-2000 90091 040 ***150.00



			City			FL	Zip Code	,
8. The abov Regserv Corp. anging its registered office or registered agent, or both, in the State of Florida. SIGNATURE By: Mark Nussbaum Vice President (NOTE: Registered Agent signature required when reinstating) DATE								
Mark Nussbaum, Vice President (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		12.	ADDITIONS/CHANGES TO OFFICERS				
THTLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			· .	Change	Addition
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TITLE NAME		☐ Delete	TITLE NAME STREET ADDRESS				Change	☐ Addition

Country

Name

13. I hereby certify that the information supplied with this filling 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 resemption of the resemption of the resemption of the resemption of the corporation or the resemption of the corporation or the resemption at a part of the corporation of the corporation of the resemption of the corporation of the resemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of supplied with this filling 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 of supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(iii) indicated in Section 119.07(3)(iii) indicated in Section 119.07(3)(iii) indicated in S

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick J. DiSalvo. Vice President

CR2E034 (9/99)