## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P99000109438 May 04, 2000 8:00 am Secretary of State SIGNATURE REAL ESTATE MANAGEMENT CORP. 05-04-2000 90091 049 \*\*\*150.00 Mailing Address Principal Place of Business 222 LAKEVIEW AVE..17TH FLOOR 222 LAKEVIEW AVE., 17TH FLOOR WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name REGSERV CORP. Street Address (P.O. Box Number is Not Acceptable) 222 LAKEVIEW AVE., 17TH FLOOR WEST PALM BEACH FL 33401 Zip Code anging its registered office or registered agent, or both, in the State of Florida 8. The abov Regserv Corps SIGNATURE By: (NOTE. Registered Agent signature required when reinstating) Mark Nussbaum, Vice President FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition DIC/CED ☐ Delete TITLE TITI F Hank Yunes 1630 S. Congress Ave. RENDINA, BRUCE A NAME NAME STREET ADDRESS 222 LAKEVIEW AVE., 17TH FLOOR STREET ADDRESS Palm Springs, FL 33441-2142 CITY-ST-ZIP CITY-ST-7IP WEST PALM BEACH FL 33401 ☐ Delete TITLE TITLE tricky. Disalvo Ave. 17th FL NAME NAME STREET ADDRESS STREET ADDRESS Beach, FL 33401 Palm CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Lawrence B. Juran NAME NAME 222 Lakeview Ave. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jest Palm Beach. CITY-ST-ZIP '□ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Detete TITLE 630 S. Congress Ave. NAME NAME STREET ADDRESS STREET ADDRESS Springs CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME Rendina, Bruce A. STREET ADDRESS STREET ADDRESS 222 Lakeview Avenue, 17th Floor CITY-ST-ZIP CITY-ST-ZIP West Palm Beach, FL 33401 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 of tustee 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 ascress, with all other like empowered.