

2000 UNIFORM BUSINESS REPORT (UBR)

4/1

DOCUMENT # P99000110244

1. Entity Name

T.T. HOLDINGS, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

04-19-2000 90080 002 ***150.00

Principal Place of Business

621 N.W. 53RD ST., STE. 450
BOCA RATON FL 33487

Mailing Address

621 N.W. 53RD ST., STE. 450
BOCA RATON FL 33487

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0976861

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Ira L. Young

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

621 N.W. 53rd Street, Suite 450

City

Boca Raton

FL

Zip Code

33487

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

Ira L. Young

4/7/00

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 ☐ Delete
NAME D
STREET ADDRESS NOVAS, ALFRED R
CITY-ST-ZIP 621 N.W. 53RD ST., STE. 450
BOCA RATON FL 33487

TITLE ☒ Delete
NAME D
STREET ADDRESS COOPERMAN, EDWIN A
CITY-ST-ZIP 621 N.W. 53RD ST., STE. 450
BOCA RATON FL 33487

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 P/T
STREET ADDRESS Alfred R. Novas
CITY-ST-ZIP 621 N.W. 53rd Street, Suite 450
Boca Raton, FL 33487

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

TITLE ☒ Change ☐ Addition
NAME VP/S
STREET ADDRESS Mark Schiller
CITY-ST-ZIP 621 N.W. 53rd Street, Suite 450
Boca Raton, FL 33487

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:

Alfred R. Novas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alfred R. Novas, President

4/200

(561) 994-6226

Date

Daytime Phone #

CR2E034 (9/99)