

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S12524****1. Entity Name**
CORPORATE PLANNING RESOURCES, INC.**FILED**
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90071 047 ***150.00

Principal Place of Business
7550 SW 128 ST
MIAMI FL 33156**Mailing Address**
7550 SW 128 ST
MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0235559

Applied For

Not Applicable

Zip

Country

Zip

Country

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****TANEN, JEFFREY S.**
2 S BISCAYNE BLVD
SUITE 3250
MIAMI FL 33156

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, 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, 2002 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 AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D			
	TANEN, JEFFREY S.			
	2 S BISCAYNE BLVD #3250			
	MIAMI FL			
	CP			
	SHOMER, TIGHE P.			
	7550 S.W. 128 STREET			
	MIAMI FL			
	S			
	BAUER, S PATRICIA			
	7550 S.W. 128 STREET			
	MIAMI FL			

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 8, 2002 305 252-6100
Date Daytime Phone #

CR2E034 (9/01)