## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # \$23246** May 19, 2000 8:00 am Secretary of State 1. Entity Name HEARTWOOD 91 INCORPORATED 05-19-2000 90808 001 \*5,461.25 Mailing Address Principal Place of Business 1750 EAST SUNRISE BLVD 1750 EAST SUNRISE BLVD FT LAUDERDALE FL 33304-3013 FT LAUDERDALE FL 33304-3013 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0378463 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FURMAN, JACK A Street Address (P.O. Box Number is Not Acceptable) 1750 E. SUNRISE BLVD. FT. LAUDERDALE FL 33304 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 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 ☐ Change 0.4500 TITLE ☐ Delete NAME LEVAN, ALAN B NAME 1750 E SUNRISE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ĎΡ ☐ Change Addition ☐ Delete TITLE TITI F GRIECO, FRANK V. NAME 1750 E SUNRISE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FT LAUDERDALE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE ABER, WILLIAM L. NAME NAME STREET ADDRESS STREET ADDRESS 1750 E SUNRISE BLVD. CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Delete ☐ Change Addition TITLE LEVAN, JARETT S NAME NAME STREET ADDRESS 1750 E SUNRISE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33304 Change ■ Addition TITLE ☐ Detete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE PMAN STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP

13. Thereby 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 receiver or trusted 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 attachmen with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-00

(954) 760 - 5448

Daytime Phone #