. 2001-UNIFORM BUSINESS REPORT (UBR) DOCUMENT # \$22761

1. Entity Name	K CLUB ESTATES, INC.	l					o4-19-20	tary 901 90333	of	Sta	te
Principal Place 12555 BISCAYNE SUITE 711 NORTH MIAMI FI US	E BLVD	Mailing Address 12555 BISCAYNE BLVD SUITE 711 NORTH MIAM! FL 33181 US	12555 BISCAYNE BLVD SUITE 711 NORTH MIAM! FL 33181			0039277					
2. Principal Pla	ace of Business										
City & State		City & State	City & State			4. FEI Number 65-0235029 Applied For					
Zip Country		Zip	Zip Country			Certificate of	Status Desir			Not 3. 75 Addi e Required	
	6. Name and Address of Curr	ent Registered Agent			7. N	lame and A	ddress of N	ew Register			
DADY 200 S SUITE	Name Street Address (P.O. Box Number is Not Acceptable)										
MIAM	II FL 33130			City						Zip Code	
SIGNATURE _ 9. This corpo Tax filing r	named entity submits this stateme Signature, typed or printed name of registered a pration is eligible to satisfy its Intang requirement and elects to do so. ria on back)	agent and title if applicable. (N	OTE: Registere W!! FEE 2001 Fee	IS \$150.00	ired when re	instating) 10. Elec	tion Campaig	ր Financing	ATE		0 May Be to Fees
11.	OFFICERS A	AND DIRECTORS	12.		- AD	DITIONS/C	HANGES TO	OFFICERS	AND D	IRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALTER, HOWARD 10800 BISCAYNE BV #705 MIAMI FL 33161	☐ Delete] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD KAYE, DEBORAH 10800 BISCAYNE BV #705 NORTH MIAMI BCH FL 3316	☐ Delete		1] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						:		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						,	[Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	STI	LE ME REET ADDRESS (Y-ST-ZIP					[Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NA Sti	TLE ME REET ADDRESS TY-ST-ZIP					[Change	Addition
	certify that the information supplied on this report or supplemental reproration or the receiver or trusted, or on an attachment with an action.	d with this filing does not qualify bort is true and accurate and th empowered to execute this rep resp. with all other like empower			Section the same 607, Flo	119.07(3)(i legal effect rida Statutes), Florida Sta ; as if made u s; and that m	tutes. I furthe ander oath; ti y name appe	er certif nat I am ears in I	y that the in an officer Block 11 o	nformation or director Block 12 if

OF SIGNING OFFICER OR DIRECTOR

609-266-7400