

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S58020

1. Entity Name

HARRIS BRETT DEVELOPMENT B.G., INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90055 049 ***150.00

Principal Place of Business		Mailing Address	
2499 GLADES RD. 105 BOCA RATON FL 33431 US		2499 GLADES RD. #110 BOCA RATON FL 33431-7260 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0268996		Applied For
		Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MUFSON, ROBERT 2499 GLADES ROAD, SUITE 110 BOCA RATON FL 33431		Name Mufson, Robert Street Address (P.O. Box Number is Not Acceptable) 2499 Glades Road, Suite 110 Boca Raton, FL 33431 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 Robert Mufson DATE 4/24/00
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUFSON, ROBERT 2499 GLADES RD., SUITE 105 BOCA RATON FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mufson, Robert 2499 Glades Road, Suite 110 Boca Raton, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, BERNARD R. 400 NO. FLAGLER DR. W. PALM BEACH FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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:

ROBERT C. MUFSON

4/24/00

Date

Daytime Phone #

CR2E034 (9/99)