

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S78998

1. Entity Name

VENTURE RESOURCES, INC.

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90197 043 ***150.00

Principal Place of Business

875 E CAMINO REAL
11F
BOCA RATON FL 33432
US

Mailing Address

875 E CAMINO REAL
11F
BOCA RATON FL 33432
US

00011500



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 65-0301667

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

BURTON ENGEL
875 E CAMINO REAL #11F
BOCA RATON FL 33432

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, 2001 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
PMD
BURTON ENGEL
875 E CAMINO REAL #11F
BOCA RATON FL 33432 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
ENGEL, MARA
1774A BEACH ST
SAN FRANCISCO CA 94123 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
145 4th Ave
NEW YORK, N.Y. 10003 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
ENGEL, ADAM
105 E. PALISADES AVE
ENGLEWOOD CLIFFS NJ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
201 W 77th St
N.Y. N.Y. 10024 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
ENGEL, SUSAN
126 MIDLAND AVE
RYE NY 10580 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SUSAN ENGEL
3 E 71st St. N.Y. N.Y. 10021 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

Date

Daytime Phone #

CR2E034 (10/00)