

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V15378

1. Entity Name

SOUTH FLORIDA ACQUISITIONS, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90104 008 ***158.75

Principal Place of Business

Mailing Address

2601 S BAYSHORE DR
#300-A
MIAMI FL 33133-5417
US

ONE GREENWAY PLAZA
STE. 850
HOUSTON TX 77046-0196
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0474323

Applied For

Not Applicable

Zip

33133-5413

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

FRIEDMAN, DAVID A
2601 S BAY SHORE DR
#300-A
MIAMI FL 33133-5417
2610 South Bayshore Drive
Suite 300-A
Miami, Florida 33133-5413

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, 2000 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

T	<input type="checkbox"/> Delete
TITLE	SWINKE, DAVID L.
NAME	ONE GREENWAY PLAZA STE. 850
STREET ADDRESS	HOUSTON TX
CITY-ST-ZIP	
DP	<input type="checkbox"/> Delete
TITLE	FRIEDMAN, LEONARD E
NAME	2601 S BAYSHORE DR STE 300-A
STREET ADDRESS	MIAMI FL
CITY-ST-ZIP	
SV	<input type="checkbox"/> Delete
TITLE	RAY, SANDRA
NAME	ONE GREENWAY PLAZA SUITE 850
STREET ADDRESS	HOUSTON TX 77046-0102
CITY-ST-ZIP	
V	<input type="checkbox"/> Delete
TITLE	FRIEDMAN, DAVID A
NAME	848 BRICKELL AVENUE, SUITE 1120
STREET ADDRESS	MIAMI FL
CITY-ST-ZIP	
VT	<input type="checkbox"/> Delete
TITLE	THIBAUT, HOWARD W
NAME	ONE GREENWAY PLAZA STE 850
STREET ADDRESS	HOUSTON TX
CITY-ST-ZIP	
	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	
NAME	Houston, Texas 77046-0196
STREET ADDRESS	
CITY-ST-ZIP	
	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	
NAME	Miami, Florida 33133-5413
STREET ADDRESS	
CITY-ST-ZIP	
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	
NAME	Sandra E. Ray
STREET ADDRESS	Houston, Texas 77046-0196
CITY-ST-ZIP	
	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	
NAME	2601 South Bayshore Drive, Suite 300-A
STREET ADDRESS	Miami, Florida 33133-5413
CITY-ST-ZIP	
	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	
NAME	Houston, Texas 77046-0196
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.

SANDRA E. RAY, SECRETARY AND VICE PRESIDENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

713-850-1850

Daytime Phone #

CR2E034 (9/99)