

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State
 05-17-2001 91290 035 ***150.00

0284953

DOCUMENT # V18495

1. Entity Name
POINTS WEST PLAZA, INC.

Principal Place of Business

1601 BELVEDERE RD
 SUITE 407S
 W PALM BEACH FL 33406
 US

Mailing Address

1601 BELVEDERE RD
 SUITE 407S
 W PALM BEACH FL 33406
 US

ADD FEE



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 **65-0324150**

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

ASARCH, STEVEN J ESQUIRE
 2385 EXECUTIVE CENTER
 SUITE 250
 BOCA RATON FL 33431

Name

Street Address (P.O. Box Number is Not Acceptable)

1900 CORPORATE BLVD
SUITE 400 E

City

BOCA RATON,

FL

Zip Code

33431

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 **PS** ☐ Delete
 NAME **MEYER, ARTHUR I**
 STREET ADDRESS **1601 BELVEDERE ROAD, SUITE 407-S**
 CITY-ST-ZIP **WEST PALM BEACH FL 33406**

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

TITLE **VP** ☐ Delete
 NAME **MEYER, SYDELLE**
 STREET ADDRESS **1601 BELVEDERE ROAD, SUITE 407-S**
 CITY-ST-ZIP **WEST PALM BEACH FL 33406**

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

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 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 *Arthur I Meyer* **Arthur I Meyer** **4/26/01** **(561)689-6601**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)