

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **V45240**

1. Entity Name

**FLARAG MORTGAGE AND INVESTMENT, INC.**

Principal Place of Business

9140 NE 8TH AVENUE, #2  
MIAMI FL 33138  
US

Mailing Address

(FLARAG/F.J. CZERNY) **FLARAG - F.J. CZERNY**  
MELIBOCUS STR. 35C  
FRANKFURT GE 60628  
GE

01 APR 13 AM 11:04

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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 **65-0403282**

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

**CZERNY, FRANZ J**  
9140 NE 8TH AVENUE #2  
MIAMI FL 33138

7. Name and Address of New Registered Agent

Name **CZERNY FRANZ Josef**  
Street Address (P.O. Box Number is Not Acceptable)  
**9140 NE 8TH AV. #2**  
City **MIAMI** FL Zip Code **33138**

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

*Jan. 17, 01*

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 \$350.00  
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PDS	<b>CZERNY, FRANZ</b>	<b>9140 NE 8TH AVENUE, #2</b>	<b>MIAMI FL</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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:

*CZERNY FRANZ J. Jan. 17, 01 - 01745473986*

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Debit/Phone #

012-ED34 (10/00)