

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

DOCUMENT #

V 45240

02 DEC 16 AM 11:49

1. Entity Name

FLARAG MORTGAGE AND INVESTMENT INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
9140 NE 8 Ave.

3. Mailing Address
Melibocusstr. 35 c

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.
2.

Suite, Apt. #, etc.

City & State
Miami Fl. 33138

City & State
60528 FRANKFURT/M

4. FEI Number
~~V 45240~~ 65-0403282

Applied For
Not Applicable

Zip Fl 33138

Florida

60528

GERMANY

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Franz Josef Czerny

Street Address (P.O. Box Number is Not Acceptable)
9140 NE 8 Ave

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.

Okt. 25 2002

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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

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 *PDS* Franz Josef Czerny
NAME FLARAG MORTGAGE AND INVESTMENT INC
STREET ADDRESS 9140 NE 8 Ave
CITY-ST-ZIP Miami Fl 33138

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Czerny F.J.

Okt. 25. 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)