

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # V51851**

1. Entity Name

STANDARD REPRODUCTIONS CO.**FILED**
Feb 08, 2001 8:00 am
Secretary of State

02-08-2001 90380 013 ***150.00

Principal Place of Business

2061 SW 70TH AVENUE
F-4
DAVIE FL 33317
US

Mailing Address

2061 SW 70TH AVENUE
F-4
DAVIE FL 33317
US**620489**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0348639**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

GREENBERG, STANLEY
8712 N.W. 19TH DR.
CORAL SPRINGS FL 33071

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 State10. 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	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	GREENBERG, STANLEY	8712 NW 19TH DRIVE	CORAL SPRINGS FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
T	GREENBERG, JULIE	714 15TH STREET	MIAMI BEACH FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	GREENBERG, RACHEL	3916 NW 22ND STREET	COCONUT CREEK FL	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
V	GREENBERG, MELANIE	8712 N.W. 19 DR.	CORAL SPRINGS FL 33071	<input type="checkbox"/>					<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)(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

STANLEY GREENBERG 2/2/01 954-424-0526

Date

Daytime Phone #

CR2E034 (10/00)