## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUITE 13 BOCA RATON FL 33487  SUITE 39 BOCA RATON FL 33487  SUITE 30 SUITE 43 BOCA RATON FL 33487  SCHUBERT, HOWARD W. 6560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487  SCHUBERT, HOWARD W. 6560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487  SUIT 1374 BURGA SUIT 1374 BUR	DOCL 1. Entity Na	1 UNIFORM BU JMENT # V6187 RE, INC.	FILED Jan 31, 2001 8:00 am Secretary of State 01-31-2001 90021 021 ***150.00						
Suite, Apt. #, etc.    Suite, Apt. #, etc.   DO NOT WRITE IN THIS SPACE	Principal Place of Business 6560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487		6560 WEST ROGERS CIRC SUITE 13	6560 WEST ROGERS CIRCLE SUITE 13					
City & State  City & State  City & State  City & State  Country  Country  Country  S. Certificate of Status Desired  \$8.75 Addition Fee Required  7. Name and Address of New Registered Agent  7. Name and Address of New Registered Agent  SCHUBERT, HOWARD W. 6560 WEST ROGERS CIRCLE SUITE 13  BOCA RATON FL 33487  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·					, 1461, 61416, 6151 (2001 (011) (2001 611) 6141 6151 6161 6161 6161 6161 6161 6161			
-Zip Country Zip Country 5, Certificate of Status Desired   \$8.75 Addition   \$9.75 Addition	Suite, Apt	t. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		O NOT WRITE IN THIS SP	'ACE		
SCHUBERT, HOWARD W. 8560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487  City  FL  Ci	City & State		City & State	City & State		. FEI Number 11-2341746 Applied For Not Applied by			
8. Name and Address of Current Registered Agent  SCHUBERT, HOWARD W. 6560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487  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  9. This corporation is eligible to satisfy its Intangible Tax filting requirement and elects to do so.  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN NAME SIREET ADDRESS CITY-S1-2P  BOCA RATON FL  D  SCHUBERT, HOWARD W. STREET ADDRESS CITY-S1-2P  TITLE D  SCHUBERT, FLORENCE SIREET ADDRESS CITY-S1-2P  Change  TITLE D  Change  Change  Change  TITLE D  Change  Chang	-≟Zip - + ⊬	Country	Zip ·	Country	5. Certificate of Statu		8:75 Add	litional	
SCHUBERT, HOWARD W. 6560 WEST ROGERS CIRCLE SUITE 13 BOCA RATON FL 33487  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  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)   Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MAKE SCHUBERT, HOWARD W. STREET ADDRESS 2543 N.W. 64TH BLVD. BOCA RATON FL   Delete   ITILE   NAME   STREET ADDRESS   STREET ADDRESS   STATE ADDRESS   STREET ADDRESS		6. Name and Address of Curr	rent Registered Agent	Name	7. Name and Addres		•		
BOCA RATON FL 33487  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 tole if applicable (NOTE: Registered Agent signature required when reinstating)  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (Gee criteria on back)  DFFICERS AND DIRECTORS  TITLE  NAME  STREET ADDRESS  ST	6560	WEST ROGERS CIRCLE			Street Address (P.O. Box Number is Not Acceptable)				
SIGNATURE    Signature, typed or printed name of registered agent and table if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE			·	City					
TITLE D SCHUBERT, HOWARD W.  STREET ADDRESS CITY-ST-ZIP BOCA RATON FL  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE D SCHUBERT, FLORENCE NAME STREET ADDRESS CITY-ST-ZIP TITLE D SCHUBERT, FLORENCE STREET ADDRESS CITY-ST-ZIP TITLE D SCHUBERT, FLORENCE STREET ADDRESS CITY-ST-ZIP TITLE D SCHUBERT, MITCHELL NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE D SCHUBERT, MITCHELL STREET ADDRESS CITY-ST-ZIP TITLE D SCHUBERT, MITCHELL STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Tax filing requirement and elects to do so.		After MAY 1, 2	After MAY 1, 2001 Fee will be \$550.0		tate Trust Fund Contribution. Added to Fees			
NAME SCHUBERT, FLORENCE STREET ADDRESS CITY-ST-ZIP- BOCA RATON FL  TITLE D SCHUBERT, MITCHELL NAME SCHUBERT, MITCHELL NAME SCHUBERT, MITCHELL NAME STREET ADDRESS CITY-ST-ZIP RICHMOND VA  Delete TITLE D Delete TITLE D Delete STREET ADDRESS CITY-ST-ZIP RICHMOND VA STREET ADDRESS CITY-ST-ZIP TITLE D Delete TITLE D STREET ADDRESS	TITLE NAME STREET ADDRESS	D SCHUBERT, HOWARD W. 2543 N.W. 64TH BLVD.		TITLE NAME STREET ADDRESS	ADDITIONS/CHANG			S IN 11  Addition	
NAME SCHUBERT, MITCHELL NAME STREET ADDRESS CITY-ST-ZIP TITLE D Delete TITLE PREEDMAN, RONI A451 N.W. 25TH WAY  NAME STREET ADDRESS	name Street address	SCHUBERT, FLORENCE 2543 N.W. 64TH BLVD. BOCA RATON FL	☐ Delete	NAME STREET ADDRESS			☐ Change	Addition	
FREEDMAN, RONI STREET ADDRESS 4451 N.W. 25TH WAY STREET ADDRESS	NAME Street address	SCHUBERT, MITCHELL 10407 WINDINGRIDGE CIR. RICHMOND VA	□ Delete	NAME STREET ADDRESS		[	☐ Change	☐ Addition	
BUCA RATUN FL	NAME	FREEDMAN, RONI	☐ Delete	NAME		Е	] Change	☐ Addition	
TITLE Delete TITLE Change Change NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Change Change	NAME Street address		☐ Delete	NAME Street Address			] Change	Addition	
TITLE	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS			] Change	Addition	