FILED

**2001 UNIFORM BUSINESS REPORT (UBR)** 

changed, or on an attachment with an address

SIGNATURE:

## Jul 12, 2001 8:00 am **DOCUMENT # 454083** Secretary of State 1. Entity Name 07-12-2001 90116 006 \*\*\*150.00 ALAN M. SANDLER, P.A. Principal Place of Business Mailing Address 117 ARAGON AVE 117 ARAGON AVE AUU77445 **CORAL GABLES FL 33134** CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1539588 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SANDLER, ALAN M Street Address (P.O. Box Number is Not Acceptable) 117 ARAGON AVE **CORAL GABLES FL 33134** Zip Code aubmits this statement 🖟 the purpose of nanging its registered office or registered agent, or both, in the State of Florida. 8. The above named SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE Delete ☐ Change SANDLER, ALAN M. NAME NAME STREET ADDRESS STREET ADDRESS 117 ARAGON AVE CORAL GABLES FL CITY-ST-ZIP CITY-ST-7IP Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE \_\_\_\_ ☐ Change ☐ Addition Delete -NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-ZIP Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

War fertile Great Great All 1990 305 442 2 RATORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #

Hachne SANDLER AND SANDLER A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS SHERIDAN HILLS PROFESSIONAL PLAZA 4020 SHERIDAN STREET, SUITE C July 9, 2001 HOLLYWOOD, FLORIDA 33021 TELEPHONE (954) 966 - 1107 ALAN M. SANDLER, P.A. MIAMI (305) 945 - 6129 MYRON SANDLER, P.A. FAX (954) 964 - 2512 117 ARAGON AVENUE CORAL GABLES, FLORIDA 33134 TELEPHONE (305) 442 - 2770 FAX (305) 444 - 0420 PLEASE REPLY TO:

Coral Gables

Secretary of State Uniform Business Report P.O. Box 1500 Tallahassee, Florida 32302-1500

Dear Sir:

Enclosed is 2001 Uniform Business Report. It is my fault that the fee was not paid prior to May 1, 2001, because the report was in my desk and shouldn't have been. Please accept the \$150.00, rather than making my boss \$550.00, because it will be a problem for me.

Very truly yours,

SANDLER & SANDLER

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