

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90119 031 ***150.00

DOCUMENT # P00000059936
1. Entity Name
MARTIN B. SACHS AND ASSOCIATES, INC.



Principal Place of Business
**6291 NW 95TH LANE
PARKLAND FL 33076**

Mailing Address
**6291 NW 95TH LANE
PARKLAND FL 33076**



2. Principal Place of Business
6255 NW 97th Avenue
Suite, Apt. #, etc.

3. Mailing Address
6255 NW 97th Avenue
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
PARKLAND, FL

City & State
PARKLAND, FL

Zip
33076

Country
USA

Zip
33076

Country
USA

4. FEI Number
65-1017685

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SACHS, MARTIN B
6291 NW 95TH LANE
PARKLAND FL 33076

7. Name and Address of New Registered Agent

Name
SACHS, MARTIN B.

Street Address (P.O. Box Number is Not Acceptable)
6255 NW 97th Avenue

City
PARKLAND, FL Zip Code
33076

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Martin B. Sachs **MARTIN B. SACHS** 1/5/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> Delete
NAME SACHS, MARTIN B	
STREET ADDRESS 6291 NW 95TH LANE	
CITY-ST-ZIP PARKLAND FL 33076	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SACHS, MARTIN B.	
STREET ADDRESS 6255 NW 97th Avenue	
CITY-ST-ZIP Parkland, FL 33076	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Martin B. Sachs **SIGNATURE REQUIRED** 1/5/03 954227-5164
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)