

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000046577

FILED
Apr 07, 2002 8:00 AM
Secretary of State

Entity Name: KARIN C. NUDELMAN, P.A.

Current Principal Place of Business:

16475 GOLF CLUB RD SUITE 201
WESTON, FL 33326

New Principal Place of Business:

866 LAVENDER CR.
WESTON, FL 33327

Current Mailing Address:

16475 GOLF CLUB RD SUITE 201
WESTON, FL 33326

New Mailing Address:

866 LAVENDER CR
WESTON, FL 33327

FEI Number: 65-1105253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUDELMAN, KARIN C
16475 GOLF CLUB RD SUITE 201
WESTON, FL 33326

Name and Address of New Registered Agent:

NUDELMAN, KARIN C
866 LAVENDER CR
WESTON, FL 33327

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: KARIN C. NUDELMAN

04/07/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: NUDELMAN, KARIN C
Address: 866 LAVENDER CR.
City-St-Zip: WESTON, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KARIN C NUDELMAN

P

04/07/2002

Electronic Signature of Signing Officer or Director

Date