

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90179 041 ***150.00

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DOCUMENT # P02000123710

1. Entity Name
JASON SMITH, P.A.



Principal Place of Business
**9500 S. DADELAND BLVD.
SUITE 700
MIAMI FL 33156**

Mailing Address
**9500 S. DADELAND BLVD.
SUITE 700
MIAMI FL 33156**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

55-0809180

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WILSON, DONALD D JR.
9500 S. DADELAND BLVD.
SUITE 700
MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name

Jason S. Smith

Street Address (P.O. Box Number is Not Acceptable)

3240 Mary St. #5-209

City

Miami

FL

Zip Code

33133

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

Jason S. Smith
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/25/03

FILE NOW! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 NAME	PD SMITH, JASON	☐ Delete
STREET ADDRESS	2000 OAK AVENUE 3240 Mary St.	
CITY-ST-ZIP	COCONUT GROVE FL 33133 #5-209, FL 33133	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	Smith, Jason	☒ Change ☐ Addition
STREET ADDRESS	3240 Mary St. #5-209	(Address change only)
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		☐ Change ☐ Addition
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/25/03

CR2E034 (4/03)

ATTACHMENT
#PO2000/23710
86142310

Dear Florida Department of State,

August 29, 2003

I am writing you to ask for relief in regards to the 2002 Uniform Business Report late filing fee penalty of \$400. I am a first time corporation officer with this new corporation and was not familiar with the process. Also, my office recently moved and the mail was not forwarded to the new address. Thank you very much for your consideration and this will not happen again.

Sincerely,

Jason Smith
Jason Smith P.A.

-786-999-1574

FEI # 55-0809180