## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P98000103497

MARACINI, MICHELE A

1230 NE 91 TERRACE

MIAMI, FL 33138

Name: Address:

City-St-Zip:

Entity Name: STOKES MCMILLAN & MARACINI P.A.

FILED Feb 19, 2003 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
2 SOUTH MIAMI, FL		LVD., STE 3750			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2 SOUTH MIAMI, FL		LVD., STE 3750			
FEI Number	: 65-0880605	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
	E AVE. RINGS, FL 33		urpose of changing its registered	d office or registered agent, or both,	
	e of Florida.				
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( STOKES, PAU 1190 DOVE AV MIAMI SPRINC	/E.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DST ( MCMILLAN, JA 18900 S.W. 14 MIAMI, FL 33	17 AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SCHILLER, LE	BLVD STE 3750	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DV (	) Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: PAUL M. STOKES DP 02/19/2003