

2000 UNIFORM BUSINESS REPORT (UBR)

10/2

DOCUMENT # 999000005474
 1. Entity Name
LAW OFFICES OF RICHARD ROSSI, P.A.

FILED
 00 MAY -1 AM 8:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 4801 S. Univ. Dr. Suite 3000 Davie FL 33328
 265 S.Fed Hwy. #305 Deerfield Bch. FL

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.
 33441

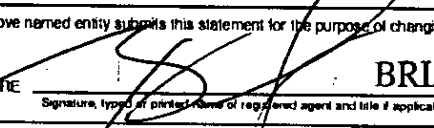
DO NOT WRITE IN THIS SPACE

City & State Zip Country
 City & State Zip Country

4. FEI Number **65-0907927**
 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RICHARD ROSSI
6830 N. Federal Hwy
Boca Raton, FL 33441

7. Name and Address of New Registered Agent
 Name **Corporation Service Company**
 Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
 City **Tallahassee FL** Zip Code **32301**

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.
 SIGNATURE  **BRIAN COURTNEY, ASST. V.P.** DATE **5/1/2000**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back)


FILED MONTHLY FEE TO BE PAID
 After MAY 1, 2000 Fee will be \$25.00
 Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	president Director <input type="checkbox"/> Delete Richard Rossi 265S.Fed.Hwy.# 305 Deerfield Bch.FL <input type="checkbox"/> Delete 33441	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19 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 changed, or on an attachment with an address, with all other like empowered.
 SIGNATURE:  **RICHARD ROSSI** DATE **4/28/2000** DAYTIME PHONE # **954-422-9974**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR /Date Daytime Phone #

CR2E034 (9/99)

2082



ACCOUNT NO. : 072100000032
REFERENCE : 681580 170487A
AUTHORIZATION : *Patricia Pignatelli*
COST LIMIT : \$ 150.00

ORDER DATE : May 1, 2000
ORDER TIME : 4:02 PM
ORDER NO. : 681580
CUSTOMER NO: 170487A

CUSTOMER: Richard Roy Rossi, Esq
Law Offices Of Richard Rossi,
Pmb #305
265 South Federal Highway
Deerfield Beach, FL 33441

CHANGE OF AGENT

NAME: LAW OFFICES OF RICHARD ROSSI,
P.A.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

RECEIVED
00 MAY -1 PM 4:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA