

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

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90014 043 ***158.75

DOCUMENT # H00855

1. Entity Name

LAWRENCE T. GRAND, D.D.S., P.A.

DO NOT WRITE IN THIS SPACE

824503

2. Principal Place of Business

18962 SW 94th Avenue

Suite, Apt. #, etc.

3. Mailing Address

18962 SW 94th Avenue

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

59-2402846

Applied For

Not Applicable

Zip

33157-7958

Country

USA

Zip

33157-7958

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name
David R. Weissman

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

9200 S. Dadeland Blvd., Suite 508

City
Miami,

FL

Zip Code
33156

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GRAND, LAWRENCE T. 18962 SW 94 AVE., Miami, FL 33157
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DO NOT WRITE IN THIS SPACE

13. 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, trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lawrence T. Grand, D.D.S., P.A.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 11, 2002
Date Daytime Phone #

CR2E034B (12/01)

DAVID R. WEISSMAN
ATTORNEY AT LAW
SUITE 508 DADELAND TOWERS
9200 SOUTH DADELAND BOULEVARD
MIAMI, FLORIDA 33156

Attachment
DOC# H00855

824503

TELEPHONE (305) 670-0987
TELEFAX (305) 670-1450

February 13, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Lawrence T. Grand, D.D.S., P.A.
Document #H00855
2002 Annual Uniform Business Report

Gentlemen:

I am the Attorney and Registered Agent for the above-referenced Corporation. Enclosed please find the following:

1. 2002 Annual Uniform Business Report
2. Lawrence T. Grand, D.D.S., P.A. Check #8801, payable to the Department of State, in the amount of \$158.75, for the filing fee and for a Certificate of Status
3. Self-addressed, stamped envelope

Kindly issue a Certificate of Status and return same to the undersigned in the enclosed self-addressed, stamped envelope.

Very truly yours,



David R. Weissman

DRW/map
Enclosures

cc: Lawrence T. Grand, D.D.S., P.A.