

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

DOCUMENT # 900000016025	
1. Entity Name RS Rosenblum, PA	

FILED

03 DEC 19 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 8738 SE RIVERFRONT TERRACE	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State TEQUESTA, FL	City & State
Zip 33469	Country USA
Zip	Country

900024340759
10/31/03--01087--002 **150.00
DO NOT WRITE IN THIS SPACE

4. FEI Number
58-2522106

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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7. Name and Address of Current Registered Agent

Name
R. Scott Rosenblum
Street Address (P.O. Box Number is Not Acceptable)
8738 SE Riverfront Terrace
City Tequesta **FL** 33469

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

REINSTATEMENT

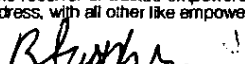
January 1 - May 1 Fee is \$150.00
April 1 - May 1 Fee is \$250.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	R. Scott Rosenblum President 8738 SE Riverfront Terrace Tequesta, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **R Scott Rosenblum, DO 10/25/2003**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

567-352-6042

2013

R. Scott Rosenblum, D.O.

8738 SE Riverfront Terrace, Tequesta, FL 33469, H (561) 352-6042 F (810) 454-6210, ScottRosenblum@yahoo.com

Saturday, October 25, 2003

Dear Sirs,

I am in receipt of your Notice of Administrative dissolution with great concern. Apparently my reports never made it to your offices and I am very sorry. I would be very grateful if you will accept my UBR's at this time for RS Rosenblum, PA and RSR mgmg, LLC. Enclosed are the signed forms and the appropriate checks.

Respectfully yours,

R. Scott Rosenblum, DO

Advanced Sports Medicine MRI and Neuroradiology

Department of Radiology

Jupiter Medical Center

1210 S. Old Dixie Hwy.

Jupiter, Florida

~~Office (561) 748-4110~~

561-352-6042

R. Scott Rosenblum, D.O.

8738 SE Riverfront Terrace, Tequesta, FL 33469, H (561) 352-6042 F (810) 454-6210, ScottRosenblum@yahoo.com

Sunday, December 14, 2003

Dear Sirs,

This is in response to our conversation. My first letter was in error. The reason I did not file my Uniformed Business Report by the deadline is that I never received it.

Respectfully yours,

R. Scott Rosenblum, DO

RS Rosenblum, PA
