

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90005 048 ***158.75

DOCUMENT # 519898

1. Entity Name

FREIDIN & BROWN, P.A.

Principal Place of Business

Mailing Address

**44 W. FLAGLER ST.
 25TH FLOOR
 MIAMI FL 33130**

**44 W. FLAGLER ST.
 25TH FLOOR
 MIAMI FL 33130-1808**

****Change of address effective 4/1/2000**

2. Principal Place of Business

Suite 3100

One Biscayne Tower

Mailing Address

One Biscayne Tower #3100

Suite, Apt. #, etc.

Suite, Apt. #, etc.

2 S.Biscayne Blvd.

2 S.Biscayne Blvd.

City & State
Miami, Florida 33131

City & State
Miami, Florida

Zip
33131

Country
Dade

Zip
33131

Country
Dade

4. FEI Number **59-1706803**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FREIDIN, PHILIP ESQ.
 44 WEST FLAGLER ST.
 SUITE 2500
 MIAMI FL 33130**

Name

Philip Freidin

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

One Biscayne Tower, Suite 3100

2 S.Biscayne Blvd.

City

Miami

FL

Zip Code
33187

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 state 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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
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
PS
 NAME
FREIDIN, PHILIP
 STREET ADDRESS
44 WEST FLAGLER ST.
 CITY-ST-ZIP
MIAMI FL

☐ Delete

TITLE
President
 NAME
Philip Freidin
 STREET ADDRESS
One Biscayne Tower, Suite 3100
 CITY-ST-ZIP
Miami, FL 33131

☐ Change ☐ Addition

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☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #