

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90615 046 ***150.00

021390 AV

DOCUMENT # 564127

1. Entity Name
SIEGFRIED, RIVERA, LERNER, DE LA TORRE & SOBEL, P.A.

Principal Place of Business 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134	Mailing Address 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-1777539** 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

SIEGFRIED, STEVEN M.
201 ALHAMBRA CIRCLE, SUITE 1102
CORAL GABLES FL 33134

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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. *See attached addendum* DELETIONS OF OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. DELETIONS OF OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
	DVP SIEGFRIED, STEVEN M 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	PTD RIVERA, OSCAR R. 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DSV ARIAS, MARIA VICTORIA 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134	<input type="checkbox"/> Delete	DVP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	DVP HARRINGTON, JAMES F 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33134	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DVP KOZLOW, ELISABETH D 201 ALHAMBRA CIR 1102 CORAL GABLES FL 33133	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	DVP EDWARDS, PETER H 201 ALHAMBRA CIRCLE SUITE 1102 CORAL GABLES FL 33134	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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]* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 305442-3331
Date Daytime Phone #

CR2E034 (9/01)

attachment
Doc# 564127

85/954

Document #564127

SIEGFRIED, RIVERA, LERNER, DE LA TORRE & SOBEL, P.A.

Box #11

Additional Officers and Directors:

Title: Director/Secretary
Name: Lisa A. Lerner
Street Address: 201 Alhambra Cir 1102
City, State: Coral Gables, FL 33134

Title: Director/Vice President
Name: Helio De La Torre
Street Address: 201 Alhambra Cir 1102
City, State: Coral Gables, FL 33134

Title: Director/Vice President
Name: Stuart H. Sobel
Street Address: 201 Alhambra Cir 1102
City, State: Coral Gables, FL 33134