

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

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90740 030 ***150.00

DOCUMENT # 600033

1. Entity Name

Northpark Pediatrics Professional Association

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

100 NW 170 Street

3. Mailing Address

100 NW 170 Street

Suite, Apt. #, etc.

201

Suite, Apt. #, etc.

201

DO NOT WRITE IN THIS SPACE

City & State

North Miami Beach, FL

City & State

North Miami Beach, FL

4. FEI Number

590937192

Applied For

Not Applicable

Zip

33169

Country

Miami-Dade

Zip

33169

Country

Miami-Dade

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Michael B. Udell

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

5400 S University Dr

Suite 117

City

Davie

FL

Zip Code

33328

**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)

5/20/2002

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
President	William Kendrick	1195 Water View Lane	Ft. Lauderdale, FL
Vice President	Steven G. Tucker	844 SW 138 Street	Miami, FL 33158
TREAS/SEC	Ray Acevedo	11524 Terra Bella Blvd	Plantation, FL 33325

**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 registered agent or 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, and all other like empowered.

SIGNATURE: 

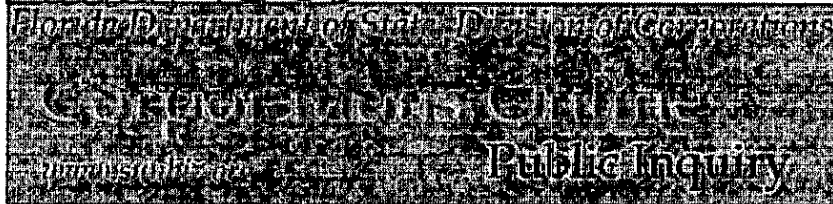
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment



Florida Profit

NORTHPARK PEDIATRICS PROFESSIONAL ASSOCIATION

PRINCIPAL ADDRESS
100 NW 170TH ST
SUITE 201
NORTH MIAMI BEACH FL 33169 US
Changed 02/01/1994

MAILING ADDRESS
C/O UDELL, MICHAEL
5745 S. UNIVERSITY DR.
DAVIE FL 33328 US
Changed 01/26/1998

Document Number
600033

State
FL

FBI Number
590937192

Status
ACTIVE

Date Filed
09/12/1961

Effective Date
NONE

Last Event
NAME CHANGE AMENDMENT

Event Date Filed
06/07/1993

Event Effective Date
NONE

Registered Agent

Name & Address
UDELL, MICHAEL B. 5745 S. UNIVERSITY DR. DAVIE FL 33328
Name Changed: 09/22/1992
Address Changed: 01/26/1998

Officer/Director Detail

Name & Address	Title
KENDRICK, WILLIAM M. 1195 WATERVIEW LANE FT. LAUDERDALE FL	P
TUCKER, STEVEN G. 844 SW 138TH ST MIAMI FL 33158	V
ACEVEDO, RAY 11524 TERRA BELLA BLVD PLANTATION FL 33325	TS

Annual Reports