## **2001 UNIFORM BUSINESS REPORT (UBR) FILED** Apr 26, 2001 8:00 am Secretary of State **DOCUMENT # 602431** 1. Entity Name **HORWICH & ZAGER PA** 04-26-2001 90065 044 \*\*\*150.00 Principal Place of Business Mailing Address 1541 SUNSET DRIVE 1541 SUNSET DRIVE 2ND FLOOR FEDERAL BLDG 2ND FLOOR FEDERAL BLDG CORAL GABLES FL 33143 CORAL GABLES FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1302622 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HORWICH, RICHARD J Street Address (P.O. Box Number is Not Acceptable) 1541 SUNSET DRIVE CORAL GABLES FL 33143 Zip Code FL 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 il applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete TITLE ☐ Change Addition HORWICH, RICHARD J NAME NAME STREET ADDRESS 1541 SUNSET DRIVE STREET ADDRESS CITY-ST-7IP CORAL GABLES, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition ZAGER, IRA NAME STREET ADDRESS 1541 SUNSET DRIVE STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 00000 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition HORWICH, MITCHELL NAME NAME STREET ADDRESS 1541 SUNSET DRIVE STREET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Tirle ☐ Chacge ☐ Addition HORWICH, FRANCINE NAME NAME STREET ADORESS 1541 SUNSET DR. STREET ADDRESS CITY-ST ZIP CORAL GABLES FL CITY-ST-ZIP

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 trudee 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.

TIT! E

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CHY-ST-ZIP

SIGNATURE:

TIFLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-S"-ZIP

Juhard J. Touchel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

RICHARD J. HORWICH

4/18/01

(305) 66 5299

Change

☐ Change

Addition

Addition

Daytime Phone #