

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90153 004 ***150.00

DOCUMENT # 620055

1. Entity Name
KENNETH J. GOLDBERG, M.D., P.A.



Principal Place of Business
320 SOUTH FEDERAL HWY
HOLLYWOOD FL 33020

Mailing Address
320 SOUTH FEDERAL HWY
HOLLYWOOD FL 33020

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1916164

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOLDBERG-MOSER, DELLA
3921 N 37TH AVE
HOLLYWOOD FL 33021

Name
MOSE - GOLDBERG, DELLA

Street Address (P.O. Box Number is Not Acceptable)
5420 SHADY OAK LANE

City **FT. LAUDERDALE** **FL** Zip Code **33312**

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 *Della Moser Goldberg*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-12-02
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **PD GOLDBERG, KENNETH J.**
STREET ADDRESS **320 SOUTH FEDERAL HWY.**
CITY-ST-ZIP **HOLLYWOOD FL**

☒ Change ☐ Addition
NAME
STREET ADDRESS **5420 SHADY OAK LANE**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33312**

TITLE ☐ Delete
NAME **D GOLDBERG, DELLA MESER**
STREET ADDRESS **3921 N 27TH AVE**
CITY-ST-ZIP **HOLLYWOOD FL**

☒ Change ☐ Addition
NAME
STREET ADDRESS **MOSE - GOLDBERG, DELLA**
CITY-ST-ZIP **5420 SHADY OAK LANE**
FT. LAUDERDALE, FL 33312

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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☐ Change ☐ Addition
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CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Della Moser Goldberg*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/2003 954-966-6516
Date Daytime Phone #

CR2E034 (10/02)