2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 686017

1. Entity Name

HYMAN, KAPLAN, GANGUZZA, SPECTOR & MARS, P.A.



FILED Feb 06, 2003 8:00 am Secretary of State

02-06-2003 90077 041 ***150.00

					CO WE T							
Principal Place of Business 150 W FLAGLER STREET SUITE 2701 MIAMI FL 33130 US			Mailing Address 150 W FLAGLER ST SUITE 2701 MIAMI FL 33130 US									
Place of Busin	J. Maiii	3. Mailing Address									#1#17 V (#1) # #1	
#, etc.	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES						
te	City 8	City & State				4. FEI Number 59-2029525			-	Applied For Not Applicable		
Zip Country Zip			Zip Country				5. C	Certificate of Status Des	sired		8.75 Ad	ditional
6. Name and Address of Current Registered Agent							7. N	ame and Address of	New Req			
		<u></u>			Name							
MICHAEL L	٠				Street Address (P.O. Box Number is Not Acceptable)							
701					# •							
L 33130									FI	Zip Cod	le	
		: or the purpo	se of changing its	registere	d office or re	egistere	d age	ent, or both, in the State	e of Florid		l miliar with,	and accept
Signature, typed o	r printed name of registered agen	t and title if applic	able. (NOTE	: Registered	Agent signature	required v	vhen rei	nstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State										cing		00 May Be d to Fees
	OFFICERS AND	DIRECTOR	S	11.			ADI	DITIONS/CHANGES TO	O OFFICE	BS AND I	DIRECTOR	S IN 11
150 W FL	MICHAEL L AGLER #2701	☐ Delete AEL L ER #2701		TITLE NAME STREE	ET ADDRESS							Addition
V KAPLAN, A 150 W FL	ANDREW AGLER #2701		☐ Delete	TITLE NAME STREE	ET ADDRESS					l	Change	☐ Addition
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	BLER STREET B130 Place of Busine #, etc. te 6. Name MICHAEL L LAGLER STF 701 L 33130 e named entity tions of registe Signature typed of RAYMAN, N 150 W FL MIAMI FL V KAPLAN, A 150 W FL	Country 6. Name and Address of Current MICHAEL L LAGLER STREET 701 L 33130 e named entity submits this statement fittions of registered agent. Signature, typed or printed name of registered agent FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND PD HYMAN, MICHAEL L 150 W FLAGLER #2701 MIAMI FL 33130	SLER STREET SUITE SIGNO MIAMI US Place of Business J. Mailin #, etc. Country Country Jip 6. Name and Address of Current Registered MICHAEL L LAGLER STREET 701 J. 33130 e named entity submits this statement for the purpo tions of registered agent. Signature, typed or printed name of registered agent and title if applic FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State OFFICERS AND DIRECTOR PD HYMAN, MICHAEL L 150 W FLAGLER #2701 MIAMI FL 33130 V KAPLAN, ANDREW 150 W FLAGLER #2701	SEER STREET SUITE 2701 MIAMI FL 33130 US Place of Business 3. Mailing Address 4. etc. Country Zip 6. Name and Address of Current Registered Agent MICHAEL L LAGLER STREET 701 L 33130 Is named entity submits this statement for the purpose of changing its tions of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE FILE NOW!!! FEE IS \$150.00 Ir May 1, 2003 Fee will be \$550.00 Ik Payable to Florida Department of State OFFICERS AND DIRECTORS PD HYMAN, MICHAEL L 150 W FLAGLER #2701 MIAMI FL 33130 V KAPLAN, ANDREW 150 W FLAGLER #2701 MIAMI FL 33130 Delete Delete	Ster Street State Street Str	Mailing Address SIER STREET 150 W FLAGLER ST SUITE 2701 MIAMI FL 33130 US Place of Business 3. Mailing Address 4. etc. Country Zip Country Zip Country 6. Name and Address of Current Registered Agent MICHAEL L LAGLER STREET 701 1. 33130 City an ammed entity submits this statement for the purpose of changing its registered office or retions of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature FLE NOW!!! FEE IS \$150.00 In May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State OFFICERS AND DIRECTORS PD HYMAN, MICHAEL L 150 W FLAGLER #2701 MIAMI FL 33130 V KAPLAN, ANDREW 150 W FLAGLER #2701 MIAMI FL 33130 Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP	Size STREET 150 W FLAGLER ST SUITE 2701 MIAMI FL 33130 US 3. Meiling Address #, etc. Country Zip Country City & State Country 6. Name and Address of Current Registered Agent MICHAEL L LAGLER STREET 701 L 33130 City Inamed entity submits this statement for the purpose of changing its registered office or registeret tions of registered agent. Signature, typed or printed name of registered agent and title # applicable. (NOTE: Registered Agent signature required signature required signature required signature required signature required signature. The purpose of changing its registered office or registered tions of registered agent. Signature, typed or printed name of registered agent and title # applicable. Figure Rows (FL) Signature, typed or printed name of registered agent and title # applicable. Signature, typed or printed name of registered agent and title # applicable. Signature, typed or printed name of registered agent and title # applicable. Signature, typed or printed name of registered agent and title # applicable. (NOTE: Registered Agent signature required signatu	Mailing Address 150 W FLAGLER ST 150 W FLAGLER STOOT 150 W FLAGLER STOOT	Mailing Address 150 W FLAQLER ST SURE 2701 MIAM FL 33130 US Place of Business 3. Mailing Address 150 W FLAQLER ST SURE 2701 MIAM FL 33130 US Pace of Business 3. Mailing Address 4. FEI Number 59-202 5. Country 5. Country 5. Certificate of Status Delect Name MICHAEL L Street Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name 1. Name 1. Street Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Status Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Current Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Address of Current Delected Address (P.O. Box Number is Not Accellable) 1. City 1. Name and Addres	Mailing Address LER STREET 150 W FLAGLER ST SUITE 201 MAMI FL 3330 WAMIFL 3330 CHECK HERE IF COUNTY Zip Country Size Country 5. Certificate of Status Desired 7. Name and Address of New Rug Name Street Address (P.O. Box Number is Not Acceptable) Regulated Agent applicated Agent and title 4 applicable. WARTH REGULAR STREET WAMIFLER IS \$150.00 WE Rayable to Florida Department of State OFFICERS AND DIRECTORS PD HYMAN, MICHAEL L SUITE REQULATED Agent applicated Agent and title 4 applicable. WAPLAN, ANDREW STREET ADDRESS OFF-57-2P WARLAN, ANDREW STREET ADDRESS OFF-57-2P Detels Detels TILE NAME STREET ADDRESS OFF-57-2P Detels Detels Detels TILE NAME STREET ADDRESS OFF-57-2P Detels Detels TILE NAME STREET ADDRESS OFF-57-2P Detels Detels TILE TILE	Mailing Address ISO W FLAGLER ST SUITE ZOID MAM FL 33130 US Place of Business J. Mailing Address J.	Mailing Address 150 W FLAGER ST 150 W FLAGER S

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 of perfike empowered.

SIGNATURE:

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #