2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State
01-21-2003 90163 012 ***150.00

DOCUMENT # 693790

20013339

1. Entity Name
BERGMAN, SPIEWAK GOTTESMAN & COMPANY, P.A.

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
499 NW 70TH AVE. STE 116 PLANTATION FL 33317 US	499 NW 70TH AVE. STE 218 PLANTATION FL 33317 US

2. Principal Place of Business	3. Mailing Address
8211 W. Broward Blvd #440 Suite, Apt. #, etc.	8211 W. Broward Blvd #440 Suite, Apt. #, etc.
City & State: Plantation	City & State: Plantation
Zip: 33324 Country: USA	Zip: 33324 Country: USA

4. FEI Number 59-2099983 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BERGMAN, GARRY S.
499 NW 70 AVE #116
PLANTATION FL 33317

7. Name and Address of New Registered Agent

Name: Marc A. Spiewak
Street Address (P.O. Box Number is Not Acceptable): 10815 Richmond Place
City: Cooper City FL Zip Code: 33026

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: M. A. Spiewak 1/15/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BERGMAN, GARRY S 1031 N.W. 107TH AVE. PLANTATION FL 33322	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SPIEWAK, MARC A 10815 RICHMOND PL COOPER CITY FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOTTESMAN, ALLAN 10326 QUITO ST COOPER CITY FL 33026	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

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: M. A. Spiewak SIGNATURE REQUIRED 1/15/03 954-321-9991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #