

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 760963

1. Entity Name

UNITED HEARING AND DEAF SERVICES, INC.

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90115 016 ****61.25

Principal Place of Business

2800 W OAKLAND PK BLVD
306
OAKLAND PARK FL 33311
US

Mailing Address

2800 W OAKLAND PK BLVD
306
OAKLAND PARK FL 33311
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2184162

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WATSON, HOWARD
2800 W OAKLAND PARK BLVD, STE 306
OAKLAND PARK FL 33311

7. Name and Address of New Registered Agent

Name: Randi S. Grossman
Street Address (P.O. Box Number is Not Acceptable)
2800 W. Oakland Park Blvd
Ste 306
City: Oakland Park FL Zip Code: 33311

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 Randi S. Grossman
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

11/31/01
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME D
STREET ADDRESS GRAY, MARLENE
CITY-ST-ZIP 8411 W OAKLAND PK BLVD #201
SUNRISE FL 33351

TITLE ☐ Delete
NAME D
STREET ADDRESS LERNER, IRA
CITY-ST-ZIP 260 NW 76TH AVE. #14-208
MARGATE FL 33063

TITLE ☐ Delete
NAME PD
STREET ADDRESS GROSSMAN, RANDI
CITY-ST-ZIP 600 N PINE ISLAND RD
PLANTATION FL 33324

TITLE ☐ Delete
NAME D
STREET ADDRESS CHAPLAN, EDITH MS.
CITY-ST-ZIP 370 NW 76TH AVENUE, #407
MARGATE FL 33063

TITLE ☐ Delete
NAME D
STREET ADDRESS LIETZKE, DEBBIE
CITY-ST-ZIP 600 SE 3 AVE
FORT LAUDERDALE FL 33301

TITLE ☐ Delete
NAME V
STREET ADDRESS LATHAM, RICHARD
CITY-ST-ZIP 4714 NW 5 CT
PLANTATION FL 33317

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition
NAME T
STREET ADDRESS Terrel, Nancy DR.
CITY-ST-ZIP 956 NW 76 Terrace
Plantation, FL 33324

TITLE ☐ Change ☒ Addition
NAME S
STREET ADDRESS Berman, Doris
CITY-ST-ZIP 10295 W. Clairmont
Tamarac, FL 33321

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Denis, Taras
CITY-ST-ZIP 8071 Palmetto Palm Circle
Tamarac, FL 33321

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Fleischman, Alexander
CITY-ST-ZIP 4960 E Sabal Palm Blvd
Tamarac, FL 33319

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Grant, Charles
CITY-ST-ZIP 7431 NW 1st Street
margate, FL 33063

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Wilson, Andrea
CITY-ST-ZIP 9441 Oak Grove Circle
Davie, FL 33328

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 617, 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: Randi S. Grossman

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-31-01 954 781 7200

CR2E037 (10/00)