

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 28, 2003 8:00 am
Secretary of State

03-24-2003 90175 038 ***150.00

0094971 AV

DOCUMENT # **F02000000478**

1. Entity Name

MASTERS RESEARCH PARTNERS INC.



Principal Place of Business
225 NE MIZNER BLVD
SUITE 500
BOCA RATON FL 33432

Mailing Address
225 NE MIZNER BLVD
SUITE 500
BOCA RATON FL 33432

55052566



2. Principal Place of Business

2080 NW Boca Raton Blvd

3. Mailing Address

2080 NW Boca Raton Blvd

Suite, Apt. #, etc.

6

Suite, Apt. #, etc.

6

CHECK HERE IF MAKING CHANGES

City & State

Boca Raton

City & State

Boca Raton

4. FEI Number

65-1036893

Applied For

Not Applicable

Zip

33431

Country

Palm

Zip

33431

Country

Palm

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RUTHERFORD MULHALL & WARGO-PA
2600 N MILITARY TRAIL
4TH FLOOR
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name

GARY RUBIN

Street Address (P.O. Box Number is Not Acceptable)

2080 NW Boca Raton Blvd

Ste 6

City

Boca Raton

FL

Zip Code

33431

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

[Handwritten Signature]

7/23/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
CDPT	RUBIN, GARY	225 NE MIZNER BLVD SUITE 500	BOCA RATON FL 33432	<input type="checkbox"/>
VS	KAY, GARY	225 NE MIZNER BLVD SUITE 500	BOCA RATON FL 33432	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		2080 NW BOCA RATON Blvd #6	Boca Raton, FL 33431	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		2080 NW BOCA RATON Blvd #6	BOCA RATON, FL 33431	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

Date

Daytime Phone #

7/23/03 **561** **750-1299**

CFR2E034 (4/03)