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

DO NOT WRITE IN THIS SPACE

DOCUMENT # ₃ F17274

1. Entity Name

MARTIN AND RUBIN, P.A.



## **FILED** Jul 15, 2004 8:00 am Secretary of State 07-15-2004 90009 010 \*\*\*150.00

A A O A O O A 1

					44040341				
	lace of Business	3. Mailing Address							
7 Z 8 U Suite, Apt.		Suite, Apt. #, etc	7280 W. Palmetto Park Road			NOT WRITE IN THE	00.05		
Suite		Suite 304				DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State			4. FEI Number Applied For			
Boca	Raton, EL	Boca Rator	Boca Raton, FL			59-2052321 Not Applicable			
Zip 33433	Country Zip 33433		Count USA	гу	5. Certificate of Status	5. Certificate of Status Desired   \$8.75 Additional Fee Required			
				7. Name and Address of	7. Name and Address of Current Registered Agent				
			and the second second second second	Name RO	NALD_T. MARTIN_	enter and records of	ي سيند	,	
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable) 7280 W. Palmetto Park Road					
congressiones de Secondo Societa	IN THIS	SPACE		Suite 304					
				City			Zip	Code	
				Bo	ca Raton	Fl		33433	
8. The above the obligat	named entity submits this statem ions of registered agent.	ent for the purpose of chan	iging its registere	d office or regis	tered agent, or both, in the s	State of Florida. I am	familiar v	vith, and accept	
İ									
SIGNATURE .	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Registered	Agent signature requ	ired when reinstating)	DATE			
	uary 1 - May 1 Fee is \$150.0	0		<del></del>					
After May 1, Fee is \$550.00 Amended UBR is \$61.25					9Election Car Trust Fund C	npaign Financing Contribution		55:00 May Be	
	Payable to Florida Departme	Park to the first the first to				ona location.			
10.	r.	AND DIRECTORS							
TITLE NAME	PSTD   MARTIN, RONALD T.		TITLE NAME	( ) 自分原则 医二甲酚磺胺酚酚			""""		
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CITY-ST-ZIP				TV-ST-ZIP					
TITLE	AS		MLE						
NAME	MARTIN, SHEILA M.		NAME	Spare			Andrew Control		
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

TM autus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/04

Date

561/338-4100

Daytime Phone #

CR2E034B (12/02)



FLORIDA DEPARTMENT OF STATE Glenda E. Hood DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, Florida 32314

Ottachners 4404894

Piret-Class Mail U.S. Postage PAID State of Florida 34321

## NOTICE OF INTENT TO DISSOLVE

0123516 01 AV 0.176 \*\*AUTO TO 8 1203 33433-340179 MARTIN AND RUBIN, P.A. 7280 W. PALMETTO PARK RD. 304 **BOCA RATON FL 33433-3401** 

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Document # F17274

- Enter address to mail report to, if <u>different</u> from preprinted mailing address.
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- Allow 10-14 business days to receive form.

MARTIN AND RUBIN, P.A. 7280 W. PALMETTO PARK RD.

**BOCA RATON FL 33433-3401** 

Mail Report to:

CR2E095 4/04

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