

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

FILED
Jul 15, 2004 8:00 am
Secretary of State

07-15-2004 90009 010 ***150.00

DOCUMENT # F17274

1. Entity Name

MARTIN AND RUBIN, P.A.



DO NOT WRITE IN THIS SPACE

44048941

2. Principal Place of Business

7280 W. Palmetto Park Road

3. Mailing Address

7280 W. Palmetto Park Road

Suite, Apt. #, etc.

Suite 304

Suite, Apt. #, etc.

Suite 304

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

59-2052321

Applied For

Not Applicable

Zip

33433

Country

USA

Zip

33433

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name RONALD T. MARTIN

Street Address (P.O. Box Number is Not Acceptable)
7280 W. Palmetto Park Road

Suite 304

City

Boca Raton

FL

Zip Code
33433

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
PSTD
MARTIN, RONALD T.
6116 Amberwoods Drive
Boca Raton, FL 33433

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
MARTIN, SHEILA M.
6116 Amberwoods Drive
Boca Raton, FL 33433

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

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:

R. Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/04

Date

561/338-4100

Daytime Phone #

CR2E034B (12/02)

Attached

44048941



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

First-Class Mail
U.S. Postage
PAID
State of Florida
34521

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

To receive the form by mail:

- Detach this postcard.
- Enter address to mail report to, if different from preprinted mailing address.
- Affix postage on reverse side and mail.
- Allow ~~10-14~~ business days to receive form.

Document # F17274

MARTIN AND RUBIN, P.A.
7280 W. PALMETTO PARK RD.
304
BOCA RATON FL 33433-3401

Mail Report to:



CR2E095 4/04

PLEASE BE ADVISED THAT OUR OFFICE NEVER RECEIVED THE ORIGINAL NOTICE REGARDING RENEWAL OF THE ANNUAL REPORT (UNIFORM BUSINESS REPORT).