

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90186 049 ***150.00

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

DOCUMENT # F40039		
1. Entity Name MOISES BICHACHI, P.A.		
Principal Place of Business 3912 W. 12TH AVENUE HIALEAH, FL 33012		Mailing Address 3912 W. 12TH AVENUE HIALEAH, FL 33012
2. Principal Place of Business 7950 BISCAYNE POINT CIR Suite, Apt. #, etc.		3. Mailing Address 7950 BISCAYNE POINT CIR Suite, Apt. #, etc.
City & State MIAMI BEACH, FL		City & State MIAMI BEACH, FL
Zip 33141		Country USA
4. FEI Number 59-2191844		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ - \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent BICHACHI, MOISES 3912 WEST 12 AVE HIALEAH, FL 33012		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 7950 BISCAYNE POINT CIR City MIAMI BEACH FL Zip Code 33141
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, in ink or printed name of registered agent and filer if applicable. (NOTE: Registered Agent's signature required when filing.) DATE _____		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
TITLE	P	☐ Delete
NAME	BICHACHI, MOISES	
STREET ADDRESS	3912 WEST 12 AVE	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE	S	☐ Delete
NAME	BICHACHI, OLGA	
STREET ADDRESS	3912 WEST 12 AVENUE	
CITY-ST-ZIP	HIALEAH, FL 33012	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	☒ Change ☐ Addition
NAME	BICHACHI, MOISES	
STREET ADDRESS	7950 BISCAYNE POINT CIR.	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	
TITLE	S	☒ Change ☐ Addition
NAME	BICHACHI, OLGA	
STREET ADDRESS	7950 BISCAYNE POINT CIR.	
CITY-ST-ZIP	MIAMI BEACH, FL 33141	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>MOISES BICHACHI</u> 4/16/03 305 865-0381 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR		