

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
03 JUN -2 PM 3:07

DOCUMENT # F94 000004799
 1. Entity Name Professional Center of South FL, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>1380 NE MIAMI GARDENS DR.</u> Suite, Apt. #, etc. <u># 250</u> City & State <u>North Miami Beach, FL</u> Zip <u>33179</u> Country <u>DADE</u>		3. Mailing Address <u>1380 NE MIAMI GARDENS DR.</u> Suite, Apt. #, etc. <u># 250</u> City & State <u>North Miami Beach, FL</u> Zip <u>33179</u> Country <u>DADE</u>	
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DO NOT WRITE IN THIS SPACE
3/14/03 01102 011 #150.00
 4. FEI Number 59-2262709 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
 Name PAUL FRAYND
 Street Address (P.O. Box Number is Not Acceptable) 1380 NE MIAMI GARDENS DR. # 250
 City North Miami Beach FL Zip Code 33179

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] DATE 2/24/03
Signature required for printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	President
NAME	PAUL FRAYND
STREET ADDRESS	1380 NE MIAMI GARDENS DR. # 250
CITY-ST-ZIP	North Miami Beach, FL 33179
TITLE	Treasurer
NAME	FANNY FRAYND
STREET ADDRESS	1380 NE MIAMI GARDENS DR. # 250
CITY-ST-ZIP	North Miami Beach, FL 33179
TITLE	Secretary
NAME	SAUL FRAYND
STREET ADDRESS	1380 NE MIAMI GARDENS DR. # 250
CITY-ST-ZIP	North Miami Beach, FL 33179
TITLE	
NAME	
STREET ADDRESS	
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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: [Signature] DATE: 2/26/03 (305) 940-5046

CR2E034B (12/02)

**Professional Center, S.A.
1380 NE Miami Gardens Drive
Suite 250
North Miami Beach, FL 33179
(305) 940-5046**

April 25, 2003

Secretary of State
Division of Corporation
409 East Gaines Street
Tallahassee, FL 32399

RE: Professional Center, S.A. /AK/A Professional Center of South Florida, Inc.
FEI # 59-2262709

To Whom It May Concern:

Please accept this letter as a formal request to waive the \$600.00 reinstatement fee for the above corporation. Please be advised that we did not received the 2001 nor the 2002 UBR Application for the above company because we moved and apparently the forms were still being mailed to our old address of 560 NW 165 Street Road.

I am enclosing a check in the amount of \$300.00 to be applied towards the additional fees due in order to activate the status of Professional Center, S.A. Please refer to the enclosed 2003 UBR Application that was mailed in March of 2003 and kindly update the information at your earliest possible convenience.

We thank you in advance for your consideration and prompt assistance with this matter.

Sincerely,



PAUL FRAYNE
President