

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 03, 2003 8:00 am**  
**Secretary of State**

02-03-2003 90312 029 \*\*\*150.00

0211658 AV

**DOCUMENT # G68263**

1. Entity Name  
**MICHAEL ROSENTHAL ASSOCIATES, INC.**



Principal Place of Business  
**1551 NW 82 AVENUE  
MIAMI FL 33126**

Mailing Address  
**1551 NW 82 AVENUE  
MIAMI FL 33126**



2. Principal Place of Business  
**8280 NW 27 Street**

3. Mailing Address  
**8280 NW 27 Street**

Suite, Apt. #, etc.  
**506**

Suite, Apt. #, etc.  
**506**

City & State  
**Miami, Florida**

City & State  
**Miami, Florida**

Zip  
**33122**

Country  
**USA**

Zip  
**33122**

Country  
**USA**

4. FEI Number  
**59-2353303**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

**ROSENTHAL, MICHAEL  
1551 NW 82 AVENUE  
MIAMI FL 33126**

## 7. Name and Address of New Registered Agent

Name  
**Michael Rosenthal (same)**  
Street Address (P.O. Box Number is Not Acceptable)  
**8280 NW 27 Street**  
**Suite 506**  
City  
**Miami** **FL** Zip Code  
**33122**

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

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**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

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
ROSENTHAL, MICHAEL  
1551 NW 82 AVENUE  
MIAMI FL 33126** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
ROSENTHAL, MICHAEL  
8280 NW 27 Street #506  
Miami, FL 33122** ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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CITY-ST-ZIP  
☐ Change ☐ Addition

CR2E034 (10/02)

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 an other like empowered.

SIGNATURE:

**SIGNATURE RECEIVED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**PRESIDENT**

**1/28/03 305 592-0040**

Date

Daytime Phone #