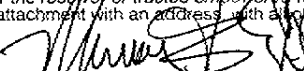


FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # G75215				Feb 02, 2004 08:00 AM Secretary of State																									
1. Entity Name MURRAY B. EPSTEIN, P.A.																													
Principal Place of Business 9130 S DADELAND BLVD PH I-A MIAMI FL 33156		Mailing Address 9130 S DADELAND BLVD PH I-A MIAMI FL 33156																											
2. Principal Place of Business		3. Mailing Address																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																											
City & State		City & State		4. FEI Number 59-2367398																									
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent EPSTEIN, MURRAY B., ESQ. 9130 S. DADELAND BOULEVARD PH I-A MIAMI FL 33156				7. Name and Address of New Registered Agent																									
				Name																									
				Street Address (P.O. Box Number is Not Acceptable)																									
				City																									
				FL Zip Code																									
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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 IT																									
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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 Block 11 if changed, or on an attachment with an address, with another like empowered																													
SIGNATURE: 				1/22/04 (305) 670-5999																									