2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 AM
Secretary of State

DOCUMENT# G96514

Entity Name: CARY R. SHOOKOFF, PH.D AND ASSOCIATES, P.A.

Current Principal Place of Business:

10751 SW 104TH STREET
MIAMI, FL 33176

New Principal Place of Business:

1900 SUNSET HARBOUR DRIVE
SUITE 2
MIAMI BEACH, FL 33139 US

Current Mailing Address:

10751 SW 104TH STREET
MIAMI, FL 33176

New Mailing Address:

1900 SUNSET HARBOUR DRIVE
SUITE 2
MIAMI BEACH, FL 33139 US

FEI Number: 59-2398787 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHOOKOFF, CARY R.
10751 SW 104TH STREET
MIAMI, FL 33176

Name and Address of New Registered Agent:

SHOOKOFF, CARY R PRES.
1900 SUNSET HARBOUR DRIVE
SUITE 2
MIAMI BEACH, FL 33139 US

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.

SIGNATURE: CARY R. SHOOKOFF, PH.D. 04/29/2002
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHOOKOFF, CARY R.,
Address: 10751 SW 104TH STREET
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PH.D (X) Change ( ) Addition
Name: SHOOKOFF, CARY R PRES.
Address: 1900 SUNSET HARBOUR DRIVE, SUITE 2
City-St-Zip: MIAMI BEACH, FL 33139 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARY R. SHOOKOFF, PH.D. PRES 04/29/2002
Electronic Signature of Signing Officer or Director Date