

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90139 009 ***150.00

DOCUMENT # H63203

1. Entity Name
DR. YOSHIHIRO OBATA & ASSOC., INC.



Principal Place of Business
% DR. YOSHIHIRO OBATA
10861 S.W. 121ST ST.
MIAMI FL 33176

Mailing Address
% DR. YOSHIHIRO OBATA
10861 S.W. 121ST ST.
MIAMI FL 33176



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2554270**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OBATA, YOSHIHIRO, DR.
10861 S.W. 121ST ST.
MIAMI FL 33176

Name **Sharon Obata**
Street Address (P.O. Box Number is Not Acceptable)
10861 SW 121 St.
City **Miami** FL Zip Code **33176**

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 Sharon Obata Sharon Obata Feb. 3, 2003
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	PD OBATA, YOSHIHIRO, DR. 10861 S.W. 121ST ST. MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD OBATA, PAUL 10861 S.W. 121ST ST. MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD OBATA, KENJI 10861 SW 121ST ST MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Sharon Obata 10861 SW 121 St. Miami, FL 33176 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD Yoshihiro Obata 10861 SW 121 St. Miami, FL 33176 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 all other like empowered.

305 238-1132

SIGNATURE:

Sharon Obata
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sharon Obata Feb 3, 2003

Date

Daytime Phone #

CR2E034 (10/02)