## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Sep 17, 2002 8:00 am Secretary of State DOCUMENT # H63614 1. Entity Name 09-17-2002 90102 012 \*\*\*550 00 PARKE-DAVIS ASSOCIATES, INC. Principal Place of Business Mailing Address 3310 PONCE DE LEON BLVD 3310 PONCE DE LEON BLVD SUITE 250 SUITE 250 CORAL GABLES FL 33134 CORAL GABLES FL 33134 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2620579 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PARKE, JOSIE EILAND Street Address (P.O. Box Number is Not Acceptable) 426 SARTO AVE CORAL GABLES FL 33134 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. **\$5.00** May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition PARKE, JOSIE EILAND NAME STREET ADDRESS 426 SARTO AVE STREET ADDRESS CiTY-ST-ZiP CORAL GABLES FL 33134 CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME PARKE, JAMES B NAME STREET ADDRESS 426 SARTO AVE STREET ADDRESS CITY-ST-ZIP: CORAL GABLES FL 33134 CITY-ST-ZIP TITLE Delete TITI F ☐ Change ☐ Addition NAME PARKE, LAURA K NAME STREET ADDRESS **426 SARTO AVE** STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33134 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

13. 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 11 or Block 12 if changed, or on an attachment with an add

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Date

Daytime Phone #

FILED

Attacknest D# H 63614 87-2289

## PARKE - DAVIS ASSOCIATES

RESIDENTIAL ■ COMMERCIAL DESIGN 3310 PONCE DE LEON BLVD., SUITE #250

CORAL GABLES, FL 33134 (305) 446-1743

Horida Department of State Division of Corporations

Sept. 4/02

He 2002 Uniform Jusiness Report which toos suppossed to have been sent to we carly this fear never carme. We just received the "Due by September 13th 2002" copy of are row Langling to have this one arrive to you on time. Is there any chence you would give us an opportunity to pay the original amount? He address though a prince on the rewly arrived report, but last year we Rappessed to have gone through a similar situation.

Der business her been hit hard since Sept. 11 4 2001 & our intake of moneys cut in less Than half. Please Consider my request Secouse of our hardship:

Your trelys, Jose Parke Parke-Devis assoo. Inc. President