

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90078 043 ***150.00

DOCUMENT # J65015

1. Entity Name

FRANK, EFFMAN, WEINBERG & BLACK, P.A.

Principal Place of Business

**8000 PETERS ROAD
 PLANTATION FL 33324-4010**

Mailing Address

**8000 PETERS ROAD
 PLANTATION FL 33324-4030**

2. Principal Place of Business

7805 S.W. 6th Court

Suite, Apt. #, etc.

3. Mailing Address

7805 S.W. 6th Court

Suite, Apt. #, etc.

City & State

Plantation, Florida

City & State

Plantation, Florida

4. FEI Number

65-0001906

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**WEINBERG, STEVEN A.
 8000 PETERS ROAD
 PLANTATION FL 33024**

7. Name and Address of New Registered Agent

Name **Steven A. Weinberg**

Street Address (P.O. Box Number is Not Acceptable)

7805 S.W. 6th Court

City **Plantation**

FL

Zip Code **33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2/25/00
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	FRANK, NEIL G.	
STREET ADDRESS	8000 PETERS ROAD	
CITY-ST-ZIP	PLANTATION FL	
TITLE	DVP	<input type="checkbox"/> Delete
NAME	EFFMAN, STEVEN E.	
STREET ADDRESS	8000 PETERS ROAD	
CITY-ST-ZIP	PLANTATION FL	
TITLE	DTS	<input type="checkbox"/> Delete
NAME	WEINBERG, STEVEN A.	
STREET ADDRESS	8000 PETERS ROAD	
CITY-ST-ZIP	PLANTATION FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BLACK, DAVID	
STREET ADDRESS	8000 PETERS RD	
CITY-ST-ZIP	PLANTATION FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRANK, NEIL G.	
STREET ADDRESS	7805 S.W. 6th Court	
CITY-ST-ZIP	Plantation, Florida 33324	
TITLE	DVP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EFFMAN, STEVEN W.	
STREET ADDRESS	7805 S.W. 6th Court	
CITY-ST-ZIP	Plantation, Florida 33324	
TITLE	DTS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEINBERG, STEVEN A.	
STREET ADDRESS	7805 S.W. 6th Court	
CITY-ST-ZIP	Plantation, Florida 33324	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLACK, DAVID	
STREET ADDRESS	7805 S.W. 6th Court	
CITY-ST-ZIP	Plantation, Florida 33324	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven A. Weinberg

Date

Daytime Phone #

2/25/00 (954) 474-8000