

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90106 029 ***150.00

DOCUMENT # K11923

1. Entity Name

P.C. Bocarad, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1590 N.W. 10th Ave.

Suite, Apt. #, etc.
Suite 202

3. Mailing Address

1590 N.W. 10th Ave.

Suite, Apt. #, etc.
Suite 202

DO NOT WRITE IN THIS SPACE

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

650022405

Applied For

Not Applicable

Zip
33486

Country
USA

Zip
33486

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Gary M. Krasna, P.A.

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

3010 North Military Trail

Suite 210

City
Boca Raton

FL

Zip Code
33431

**DO NOT WRITE
IN THIS SPACE**

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

Gary M. Krasna Gary M. Krasna

2/7/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY - ST - ZIP	P/D Doshi, Nitin 1590 N.W. 10th Avenue Suite 202 Boca Raton, FL 33486	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D Gelfand, Mark 1590 N.W. 10th Avenue Suite 202 Boca Raton, FL 33486	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/D Tylutki, Frederick 1590 N.W. 10th Avenue Suite 202 Boca Raton, FL 33486	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Halim, Sam 1515 N. Federal Highway, #405 Boca Raton, FL 33431	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Nitin Doshi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/02

Date

516-933-3126

Daytime Phone #