

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

FILED
May 08, 2002 8:00 am
Secretary of State

05-08-2002 90008 045 ***150.00

DOCUMENT # K56237

1. Entity Name

THE KAUFMAN GROUP, INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1111 BISCAYNE BLVD

Suite, Apt. #, etc.

SUITE 857

3. Mailing Address

ADAM MIAMI, FL 33181

Suite, Apt. #, etc.

SAME

City & State

NORTH MIAMI, FL

City & State

Zip

33181

Country

USA

Zip

Country

4. FEI Number

65010477

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JAMES CASSEL

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

BROAD & CASSEL

201 S. BISCAYNE BLVD

City

MIAMI

FL

Zip Code

33131

**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

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

MORTON ROSENBLUTH

4/23/02

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
PRESIDENT	CHERI KAUFMAN	465 PARK AVE.	NEW YORK, NY 10022
SECRETARY	MORTON ROSENBLUTH	1111 BISCAYNE BLVD SUITE 857	NORTH MIAMI, FL 33181
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
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**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MORTON ROSENBLUTH

4/23/02

(305) 867-0005