

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90166 023 \*\*\*150.00

07/14/03 AV

**DOCUMENT # K73303**

1. Entity Name  
**LEWIS S. KIMLER, P.A.**



Principal Place of Business  
**10605 INDIAN TRAIL  
COOPER CITY FL 33328  
US**

Mailing Address  
**10605 INDIAN TRAIL  
COOPER CITY FL 33328  
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0118807**

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

**KIMLER, LEWIS  
600 NE 3RD AVE  
FORT LAUDERDALE FL 33304**

Name

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

City

**FL**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**7-5-03**

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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  
**P  
KIMLER, LEWIS S.  
10605 INDIAN TRAIL  
COOPER CITY FL 33328** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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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.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-5-03 9545870800**

Date

Daytime Phone #

CR2E034 (4/03)

~~B~~ Attachment  
Lewis S. Kimler, P.A.  
ATTORNEY AT LAW

90142128  
K 73303

Lewis S. Kimler

Carl Karmin  
Russet Adler  
of Counsel

600 N.E. Third Avenue  
Fort Lauderdale, FL 33304

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(305) 945-5444 - Dade  
Telecopier: (954) 763-4856

July 7, 2003

Florida Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee, Florida 32314

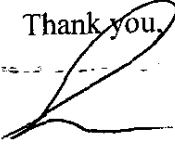
Re: Uniform Business Report - 2003

Dear Sirs:

I am enclosing the Uniform Business Report for 2003, along with our check in the amount of \$150.00.

Please be advised that we did not receive a prior Annual Report from your office.  
Therefore, we request that you waive the \$400.00 late fee.

Thank you,

  
Lewis S. Kimler

LAASK/amk  
Encls.