

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000005391

FILED  
Jul 11, 2003  
Secretary of State

**Entity Name:** THE JOBSON LAW FIRM, P.L.L.C.

**Current Principal Place of Business:**

600 NORTH PINE ISLAND ROAD  
SUITE 450  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

600 NORTH PINE ISLAND ROAD  
SUITE 450  
PLANTATION, FL 33324

**New Mailing Address:**

**FEI Number:** 65-1130153

**FEI Number Applied For** ( )

**FEI Number Not Applicable** ( )

**Certificate of Status Desired** ( )

**Name and Address of Current Registered Agent:**

JOBSON, FRANZ C  
600 NORTH PINE ISLAND ROAD  
SUITE 450  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MEMBERS:**

**Title:** MGRM ( ) Delete  
**Name:** JOBSON, FRANZ C  
**Address:** 600 NORTH PINE ISLAND ROAD, SUITE 450  
**City-St-Zip:** PLANTATION, FL 33324 US

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FRANZ C. JOBSON

MGRM

07/11/2003

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date