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

L52912 DOCUMENT

1. Entity Name

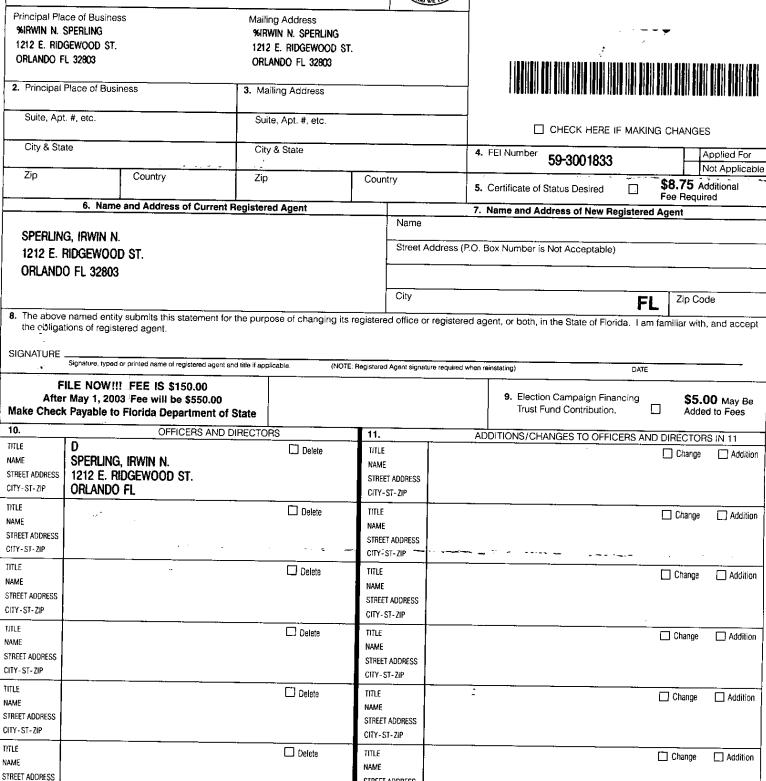
IRWIN N. SPERLING, P.A.



Principal Place of Business Mailing Address %IRWIN N. SPERLING %IRWIN N. SPERLING 1212 E. RIDGEWOOD ST. 1212 E. RIDGEWOOD ST. ORLANDO FL 32903 ORLANDO FL 32803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3001833 Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPERLING, IRWIN N. Street Address (P.O. Box Number is Not Acceptable) 1212 E. RIDGEWOOD ST. ORLANDO FL 32803 City 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE ☐ Change ☐ Addition SPERLING, IRWIN N. NAME 1212 E. RIDGEWOOD ST. STREET ADDRESS ORLANDO FL CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP Delete TITLE Change ■ Addition NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete TITLE

FILED Mar 07, 2003 8:00 am Secretary of State

03-07-2003 90136 006 ***150.00



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 changed, or on an attachment with an address, with all other (ike empowered. with an address, with all other

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

CITY-ST-7/P