

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L62262

FILED
Apr 25, 2002 8:00 AM
Secretary of State

Entity Name: ARTHUR L. DISKIN, M.D., P.A.

Current Principal Place of Business:

4300 ALTON RD
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

4300 ALTON RD
MIAMI BEACH, FL 33140

Current Mailing Address:

5401 POLK ST.
HOLLYWOOD, FL 33021 US

New Mailing Address:

3900 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD, FL 33021

FEI Number: 65-0183315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUDSON L. OWEN III
155 NW 167 ST
STE 200
N MIAMI BEACH, FL 33169

Name and Address of New Registered Agent:

ST-CYR, ISABELLE
3900 HOLLYWOOD BLVD
SUITE 101
HOLLYWOOD, FL 33021

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: ISABELLE ST-CYR

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CMP () Delete
Name: DISKIN, ARTHUR L.,
Address: 5401 POLK ST
City-St-Zip: HOLLYWOOD, FL

Title: DV () Delete
Name: MENENDEZ, RICHARD
Address: 1385 N BISCAYNE POINT RD.
City-St-Zip: MIAMI BEACH, FL

Title: DT () Delete
Name: VALDES, ALFONSO
Address: 1111 N VENETIAN DRIVE
City-St-Zip: MIAMI BEACH, FL

Title: S () Delete
Name: LANG, DAVID
Address: 3812 NE 209 TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CMP (X) Change () Addition
Name: DISKIN, ARTHUR L
Address: 3900 HOLLYWOOD BLVD #101
City-St-Zip: HOLLYWOOD, FL 33021

Title: DV (X) Change () Addition
Name: MENENDEZ, RICHARD
Address: 1385 N BISCAYNE POINT RD.
City-St-Zip: MIAMI BEACH, FL 33141

Title: DT (X) Change () Addition
Name: VALDES, ALFONSO
Address: 1111 N VENETIAN DRIVE
City-St-Zip: MIAMI BEACH, FL 33139

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR L DISKIN

P

04/25/2002

Electronic Signature of Signing Officer or Director

Date