

2001 UNIFORM BUSINESS REPORT (UBR)

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UBR-2
AV

DOCUMENT # **L93885**

1. Entity Name
ANTHONY E. PERROTTI, D.O., P.A.

FILED

01 AUG -6 AM 11: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**1731 NW 123RD AVE
PEMBROKE PINES FL 33026
US**

Mailing Address
**1731 NW 123RD AVE
PEMBROKE PINES FL 33026
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0219914

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

**PERROTTI, ANTHONY E DR
1731 NW 123RD AVENUE
PEMBROKE PINES FL 33026**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERROTTI, ANTHONY E.,D.O 1731 NW 123 AVE PEMBROKE PINES FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
500004548185--5 -08/22/01--01019--006 ****150.00 ****150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

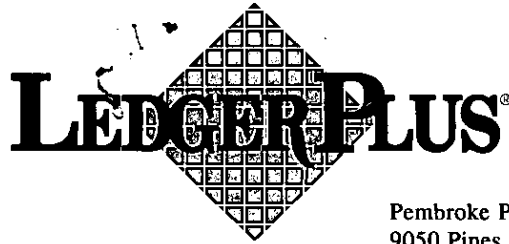
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

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Pembroke Pines Professional Centre
9050 Pines Blvd. #450
Pembroke Pines, FL 33024
(954) 450-9906
FAX (954) 450-9908
E-mail fransonph@earthlink.net
www.ledgerplus.com

Tyrone Scott
Secretary of State
409 E. Gaines Street
Tallahassee, FL 32399

Dear Mr. Scott:

My name is Paul Franson and I am the accountant for the Corporations listed below. These Corporations received the UBR package that states, "File now – due by September 12, 2001". All of them did not receive the earlier package to file by May 1, except Pirita Apartments. For various reasons Pirita Apartments did not file the earlier version. Based upon her filing history, I would respectfully request that the \$400 penalty be waived for Pirita Apartments as well as the other Corporations listed below.

Sherry Incorporated	65-0993771
Eddies Auto Clinic	65-0548081
Frank King Jeweler's	65-1059366
D-Team	65-0471307
Pirita Apartments	65-0262234
Dr. Perotti	65-027714

If I can provide any further information, please contact me at the address and telephone numbers above.

Sincerely,

A handwritten signature in cursive script that reads "Paul Franson".
Paul Franson