

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000000930

1. Entity Name

KATZMAN & KLEIN, L.C.

FILED

01 JAN 19 PM 2:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

5301 N. FEDERAL HWY., SUITE 260  
BOCA RATON FL 33487

Mailing Address

5301 N. FEDERAL HWY., SUITE 260  
BOCA RATON FL 33487

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

275

Suite, Apt. #, etc.

275

City & State

City & State

4. FEI Number

65-0853725

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KATZMAN, LEIGH C ESQ.

1100 SOUTH STATE ROAD SEVEN, SUITE 102

MARGATE FL 33068

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

*Howard L. Klein*

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

(NOTE: Registered Agent signature required when reinstating)

11/6/2001

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
KATZMAN, RUSSELL E  
8093 N.W. 71ST COURT  
TAMARAC FL 33321

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
900003567769--0  
-01/23/01--01062--026  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEM  
KLEIN, HOWARD A  
18523 OCEAN MIST DRIVE  
BOCA RATON FL 33498

☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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11. 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 is true and accurate and that my 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:

*Howard L. Klein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11/6/2001

Date

(561) 998-8414

Daytime Phone #

CR2E083 (11/00)