

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M35999

1. Entity Name

ANDREW J. NIERENBERG, P.A.

FILED
Feb 20, 2001 8:00 am
Secretary of State

02-20-2001 90060 015 ***150.00

Principal Place of Business

Mailing Address

~~2601 SO BAYSHORE DR~~
~~19 FLOOR~~
~~MIAMI FL 33133~~
~~US~~

~~2601 SO BAYSHORE DR~~
~~19TH FLOOR~~
~~MIAMI FL 33133~~
~~US~~

C0023136



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

5975 SUNSET DRIVE
Suite, Apt. #, etc.
SUITE 301

5975 SUNSET DRIVE
Suite, Apt. #, etc.
SUITE 301

City & State
SOUTH MIAMI FL

City & State
SOUTH MIAMI FL

Zip
33143

Country
US

Zip
33143

Country
US

4. FEI Number 59-2728753

Applied For
Not Applicable

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

NIERENBERG, ANDREW J.
~~2601 SO BAYSHORE DR~~
~~19TH FLOOR~~
~~MIAMI FL 33133~~

Name

Street Address (P.O. Box Number is Not Acceptable)

5975 SUNSET DRIVE
SUITE 301

City

SOUTH MIAMI

FL

Zip Code

33143

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

[Signature] ANDREW J. NIERENBERG 2/16/01

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 PSD
NAME NIERENBERG, ANDREW J.
STREET ADDRESS 2601 S. BAYSHORE DR 19TH FLR
CITY-ST-ZIP MIAMI FL 33133 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 5975 SUNSET DRIVE, STE 301
CITY-ST-ZIP SOUTH MIAMI, FL 33143

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] ANDREW J. NIERENBERG 2/16/01 305-667-4641

CR2E034 (10/00)