

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M58189

FILED
Jan 06, 2003
Secretary of State

Entity Name: ROBERT J. SAX, C.P.A., P.A.

Current Principal Place of Business:

C/O SCOTT R. WILLINGER
8180 NW 36 ST., SUITE 100
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

C/O SCOTT R. WILLINGER
8180 NW 36 ST., SUITE 100
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-0025338 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLINGER, SCOTT R.
8180 NW 36 ST., SUITE 100
MIAMI, FL 33166

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SAX, ROBERT J.,
Address: 8180 N.W. 36 ST. #100
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SAX, ROBERT J.,
Address: 8180 N.W. 36 ST. #100
City-St-Zip: MIAMI, FL 33166 US

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: ROBERT SAX

D

01/06/2003

_____ Electronic Signature of Signing Officer or Director

_____ Date