

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 16, 2002 8:00 am**  
**Secretary of State**

01-16-2002 90053 047 \*\*\*150.00

**DOCUMENT # M95228**

1. Entity Name  
**GARY R. SASLAW, P.A.**

Principal Place of Business <b>20801 BISCAYNE BLVD          SUITE 304          AVENTURA FL 33180-1422          US</b>	Mailing Address <b>20801 BICAYNE BLVD          STE 304          AVENTURA FL 33180          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	

4. FEI Number <b>65-0070948</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
<b>SASLAW, GARY          20801 BISCAYNE BLVD STE 304          AVENTURA FL 33180-1422</b>				Name					
				Street Address (P.O. Box Number is Not Acceptable)					
				City				<b>FL</b>	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 \_\_\_\_\_ (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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS				12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	DP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME	<b>SASLAW, GARY</b>		NAME				
STREET ADDRESS	<b>20801 BISCAYNE BLVD, STE 304</b>		STREET ADDRESS				
CITY-ST-ZIP	<b>AVENTURA FL 33180-1422</b>		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:** By: **GARY R. SASLAW, P.A.**  
**SIGNATURE REQUIRED**  
 Gary R. Saslaw, President

Date: **01-09-02** Daytime Phone #: **(305) 682-0200**

13000000

CR2E034 (9/01)

Attachment  
# M95228  
704754  
LAW OFFICES

GARY R. SASLAW, P.A.

20801 BISCAYNE BOULEVARD  
SUITE 304  
AVENTURA, FLORIDA 33180-1422

GARY R. SASLAW  
OF COUNSEL  
WILLIAM J. SEGAL

(305) 682-0200  
FAX (305) 682-1800  
E-MAIL: GSAZ2@AOL.COM

January 9, 2002

Uniform Business Report  
Division of Corporations  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

RE: Gary R. Saslaw, P.A.  
Document No. M95228

Dear Sir or Madam:

Enclosed please find the 2002 Uniform Business Report (UBR) for Gary R. Saslaw, P.A., along with a check in the amount of \$150.00 to cover filing fee.

Please acknowledge receipt of the enclosure by stamping and dating the enclosed copy of this letter and returning in the envelope provided for your convenience.

Sincerely yours,

GARY R. SASLAW, P.A.

Gary Saslaw

Enclosures

Attachment  
#M95228  
704754  
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GARY R. SASLAW, P.A.

20801 BISCAYNE BOULEVARD  
SUITE 304  
AVENTURA, FLORIDA 33180-1422

GARY R. SASLAW  
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GARY R. SASLAW, P.A.

Gary Saslaw

ckl:gs

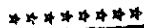
Enclosures



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U.S. POSTAGE



LAW OFFICES

**GARY R. SASLAW, P.A.**

20801 Biscayne Boulevard

Suite 304

Aventura, Florida 33180-1422