2001 UNIFORM BUSINESS REPORT (UBR) Apr 16, 2001 8:00 am Secretary of State **DOCUMENT # M96984** 1. Entity Name LAURA S.-ROTŠTEIN, P.A. 04-16-2001 90274 007 ***150.00 Principal Place of Business Mailing Address 3800 INVERRARY BLVD 3800 INVERRARY BLVD STE-100-P STE TOUP LAUDERHILL FL 33319 LAUDERHILL FL 33319 2. Principal Place of Business 3. Mailing Address 3500 WIVERRARY 3800 INVERRARY DO NOT WRITE IN THIS SPACE 101-6 101-E City & State City & State 4. FEI Number Applied For 65-0086849 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent er erakanında bir bir bir ROTSTEIN-ESO ROTSTEIN, LAURA S ESQ 3800 INVERRARY BLVD STE 100-F SVITE 101-E LAUDERHILL FL 33319 bmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named enti SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE NAME ROTSTEIN, LAURA S., ESQ NAME STREET ADDRESS 5323 PARK PLACE CIRCLE STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33486** CITY-ST-7/P TITLE ☐ Delete Addition TITI F ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 prirustee 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: