

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90027 021 ****61.25

DOCUMENT # N00000001541

1. Entity Name

THE MITIGATION INSTITUTE, INC.

Principal Place of Business

C/O LEWIS J. LAUTIN
805 EAST BROWARD BLVD. #201
FORT LAUDERDALE FL 33301

Mailing Address

C/O LEWIS J. LAUTIN
805 EAST BROWARD BLVD. #201
FORT LAUDERDALE FL 33301

2. Principal Place of Business

3215 N.W. 10 TERRACE

Suite, Apt. #, etc.

SUITE 209

City & State

FT. LAUDERDALE FL

Zip

33309

Country

BROWARD

3. Mailing Address

3215 N.W. 10 TERRACE

Suite, Apt. #, etc.

SUITE 209

City & State

FT. LAUDERDALE FL

Zip

33309

Country

BROWARD



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0993536

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAUTIN, LEWIS J

805 EAST BROWARD BOULEVARD

SUITE 201

FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

3215 N.W. 10 TERRACE #209

City

FT. LAUDERDALE

FL

Zip Code

33309

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] LEWIS LAUTIN

4/6/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete

NAME LAUTIN, LEWIS J
STREET ADDRESS 805 EAST BROWARD BLVD. #201
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE VD ☐ Delete

NAME JOHN, DAVID L
STREET ADDRESS 805 EAST BROWARD BLVD. #201
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE STD ☐ Delete

NAME PLATT, GEORGE I
STREET ADDRESS 200 EAST BROWARD BLVD. #2000
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition

NAME LAUTIN, LEWIS J
STREET ADDRESS 3215 N.W. 10 TERRACE #209
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☒ Change ☐ Addition

NAME JOHN, DAVID
STREET ADDRESS 3215 N.W. 10 TERRACE #209
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☒ Change ☐ Addition

NAME PLATT, GEORGE
STREET ADDRESS 3215 N.W. 10 TERRACE #209
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

CR2E037 (10/00)

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

[Signature] LEWIS LAUTIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/6/01 954 462 1707