

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2001 8:00 am
Secretary of State

09-13-2001 90018 027 ***550.00

00757 AV

DOCUMENT # P00000001460

1. Entity Name
MICHAEL D. KARSCH, P.A.

Principal Place of Business
7777 GLADES ROAD
SUITE 300
BOCA RATON FL 33434

Mailing Address
7777 GLADES ROAD
SUITE 300
BOCA RATON FL 33434



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7000 W. Palmetto Park Road

3. Mailing Address

7000 W. Palmetto Park Road

Suite, Apt. #, etc.

Suite 501

Suite, Apt. #, etc.

Suite 501

City & State
Boca Raton Florida

City & State
Boca Raton FL

4. FEI Number
65-0971114

Applied For

Not Applicable

Zip
33433

Country
USA

Zip
33433

Country
USA

5. Certificate of Status Desired ☐ **\$.8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

KARSCH, MICHAEL D
7777 GLADES ROAD
SUITE 300
BOCA RATON FL 33434

7. Name and Address of New Registered Agent

Name

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

7000 W. Palmetto Park Road, Suite 501

City
Boca Raton

FL

Zip Code
33434

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

9/9/01

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE
D
NAME
KARSCH, MICHAEL D
STREET ADDRESS
7777 GLADES ROAD
CITY-ST-ZIP
BOCA RATON FL 33434

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
President and Director
NAME
7000 W. Palmetto Park Road, Suite 501
STREET ADDRESS
Boca Raton, Florida 33433
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/01

Date

511-620-9234

Daytime Phone #

CR2E034 (5/01)