

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90089 046 ***150.00

DOCUMENT # P00000015291

1. Entity Name

RANDALL K. SWANSON, PA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

PO BOX 402472

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 402472

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

4. FEI Number

52-2216931

Applied For

Not Applicable

Zip

33140

Country

USA

Zip

33140

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

RANDALL K. SWANSON

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

5173 ALTON ROAD

City

MIAMI BEACH

FL

Zip Code

33140

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

RANDALL K. SWANSON

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

(NOTE: Registered Agent signature required when resigning)

DATE

4/30/02

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.75

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PD/V/T/S
RANDY SWANSON
PO BOX 402472
MIAMI BEACH, FL 33140

TITLE
NAME
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CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RANDALL K SWANSON

Date

305-345-9390

Daytime Phone /

CR2E034B (12/01)