

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000016077

1. Entity Name

JONATHAN DANN AND ASSOCIATES, INC.

Principal Place of Business

4550 SW 74 STREET  
MIAMI FL 33143 - 6271

Mailing Address

4550 SW 74 STREET  
MIAMI FL 33143 - 6271

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

See attached

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

ROHAN, LAURENCE J.  
25 PONCE DE LEON BLVD STE 320  
CORAL GABLES FL 33134

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. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	PSTD									
	DANN, JONATHAN	4550 SW 74 STREET	MIAMI FL 33143							

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-01

Date

205-665-9877

Daytime Phone #

04-04-2001 90111 010 \*\*\*150.00

FILED P00000016077

01 JUL -9 PM 12:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

2062

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

5 July 2001

Dear Sir,

We filed the UBR for Jonathan Dann and Associates on 3/30/01, sent in our check(#1342) and our check was cashed.

I talked with Scott B. on 5 July as we received another form to fill out. He told me to write you a letter informing you that we never received a correction form.

He also confirmed that you had received the check but the form had not been filed as you need the FEI #--It is 65-0989596.

Here is a copy of our form we sent in before..If you need anything further please send me a letter.

Thank you very much,

Jonathan Dann  
4550 S.W. 74<sup>th</sup> St  
Miami, Fl. 33143-6271

