

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 07, 2003 8:00 am
Secretary of State

02-07-2003 90057 020 ***150.00

DOCUMENT # P00000032745

1. Entity Name
OSSINSKY AND KROL, P.A.



Principal Place of Business
**444 SEABREEZE BLVD., SUITE 210
DAYTONA BCH FL 32118**

Mailing Address
**444 SEABREEZE BLVD., SUITE 210
DAYTONA BCH FL 32118**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3638913

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**OSSINSKY, LOUIS JR.
444 SEABREEZE BLVD., SUITE 210
DAYTONA BCH FL 32118**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
OSSINSKY, LOUIS JR.
444 SEABREEZE BLVD., SUITE 210
DAYTONA BCH FL 32118**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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 reports 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 10 or Block 11 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

Date

Daytime Phone #

CR2E034 (10/02)

Attachment #
400000032745

OSSINSKY AND KROL, P.A.

ATTORNEYS AND COUNSELORS AT LAW

444 SEABREEZE BOULEVARD

SUITE 210

DAYTONA BEACH, FLORIDA 32118-3941

LOUIS OSSINSKY, SR. (1902-1971)

JOSEPH D. KROL (RETIRED)

LOUIS OSSINSKY, JR.

TELEPHONE

(386) 252-3751

FAX

(386) 255-8247

80023937

February 5, 2003

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

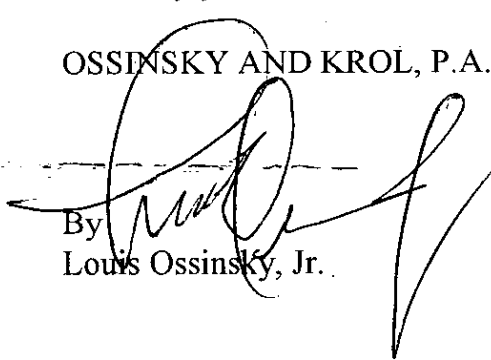
Re: Ossinsky and Krol, P.A.

Dear Sir/Madam:

Enclosed please find 2003 annual report together with
check in the amount of \$150.00 to your order to cover cost of filing.

Cordially yours,

OSSINSKY AND KROL, P.A.

By 
Louis Ossinsky, Jr.

LO,JR/kf
Enclosures