

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000052576

1. Entity Name

TIFFANY J. LANIER, P.A.

FILED

Feb 15, 2001 8:00 am  
Secretary of State

02-15-2001 90045 024 \*\*\*150.00

Principal Place of Business

2831 N OAKLAND FOREST DR. SUITE 105  
OAKLAND PARK FL 33309

Mailing Address

2831 N OAKLAND FOREST DR. SUITE 105  
OAKLAND PARK FL 33309

2. Principal Place of Business

1119 SE 3rd Avenue  
Suite, Apt. #, etc.

3. Mailing Address

1119 SE 3rd Avenue  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

65-1017049

Applied For

Not Applicable

Zip

33316

Country

USA

Zip

33316

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LANIER, TIFFANY J  
2831 N OAKLAND FOREST DR, SUITE 105  
OAKLAND PARK FL 33309

7. Name and Address of New Registered Agent

Name

Tiffany J. Lanier

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

1119 SE 3rd Avenue

City

Ft. Lauderdale

FL

Zip Code

33316

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

*Tiffany J. Lanier* Registered Agent, Director 1/31/01  
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

TITLE ☐ Delete  
NAME LANIER, TIFFANY J  
STREET ADDRESS 2831 N OAKLAND FOREST DR, SUITE 105  
CITY-ST-ZIP OAKLAND PARK FL 33309

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 1119 SE 3rd Avenue  
CITY-ST-ZIP Ft. Lauderdale, FL 33316

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

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

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

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

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:

*Tiffany J. Lanier* Tiffany J. Lanier 1/31/01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

954-763-1716  
Daytime Phone #

CR2E034 (10/00)