

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

FILED
Aug 20, 2002 8:00 am
Secretary of State

08-20-2002 90129 013 ***158.75

DOCUMENT # P00000054348

1. Entity Name

MORGAN & MORGAN INTERNATIONAL INSURANCE CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2121 PONCE DE LEON

Suite, Apt. #, etc.
240

City & State
CORAL GABLES, FL

Zip 33134

Country

3. Mailing Address
2121 PONCE DE LEON

Suite, Apt. #, etc.
240

City & State
CORAL GABLES, FL

Zip 33134

Country

4. FEI Number
65-1015734

Applied For
Not Applicable

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
PRATS, GABRIEL

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

2121 PONCE DE LEON BLVD., #240

City CORAL GABLES FL Zip Code 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) ☐

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
DPST
ZAMBRANA, JAY
2121 PONCE DE LEON #240
CORAL GABLES, FL 33134

TITLE
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CITY - ST - ZIP

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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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

Attachment

975915

P0000005 4348

MORGAN & MORGAN INTERNATIONAL INSURANCE CORP.

2121 Ponce de Leon Blvd #240

Coral Gables, FL 33134

August 2, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500


To whom it may concern:

Our Accountants have checked the records at the Division of Corporations and found that the 2002 Uniform Business Report (U.B.R.) for our company has not been filed.

According to our records we didn't receive the 2002 U.B.R. form. Enclosed is a completed 2002 U.B.R. and a check for \$158.75. We hereby request an abatement of the filling late penalties.

If you have any questions, please call our accountants Prats Fernandez & Co. at Tel: (305) 444-8333.

Sincerely,


MORGAN & MORGAN
INTERNATIONAL INSURANCE CORP.