

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90334 001 ***300.00

DOCUMENT # P00000054818

1. Entity Name
EDWIN C. RATINER, P.A.

Principal Place of Business

**60 S.W. 13TH STREET
 MIAMI FL 33130**

Mailing Address

**60 S.W. 13TH STREET
 MIAMI FL 33130**

2. Principal Place of Business

**7850 NW 146 Street
 Suite, Apt. #, etc.
 # 422**

3. Mailing Address

**P.O. Box 558747
 Suite, Apt. #, etc.**

City & State

Miami Lakes, FL

City & State

Miami, FL

4. FEI Number

65-1014872

Applied For

Not Applicable

Zip

33016

Country

Miami Dade

Zip

33255

Country

Miami Dade

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**RATINER, EDWIN C ESQ.
 60 S.W. 13TH STREET
 MIAMI FL 33130**

7. Name and Address of New Registered Agent

Name

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

7850 NW 146 St. #422

City **Miami**

FL

Zip Code

33016

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, 2002 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 **P** **EDWIN C.** ☐ Delete
 NAME **RATINER, EDWARD C**
 STREET ADDRESS **7850 NW 146 St.**
 CITY-ST-ZIP **#422**
Miami Lakes, FL
33016

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Delete
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 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 **RATINER, EDWIN C**
 STREET ADDRESS **7850 NW 146 St #422**
 CITY-ST-ZIP **Miami Lakes, FL 33016**

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

TITLE ☐ Change ☐ Addition
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 NAME
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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/15/2002

Daytime Phone #

CR2E034 (9/01)