

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

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90089 048 ***150.00

DOCUMENT # **00000068623**

1. Entity Name

RELIEFRX, INC.



DO NOT WRITE IN THIS SPACE

70027053

2. Principal Place of Business

10058 SPANISH ISLES BLVD

3. Mailing Address

Suite, Apt. #, etc.

F-5

City & State

BOCA RATON, FL.

City & State

4. Fed Number

65-1052788

Applied For

Not Applicable

Zip

33498

Country

PALM BEACH

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

LEWIS DUBERMAN

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

10058 SPANISH ISLES BLVD, F-5

City

BOCA RATON

FL

Zip Code

33498

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 registering)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	DC CEO
NAME	SALAMON, JEFFREY
STREET ADDRESS	10058 SPANISH ISLES BLVD, F5
CITY-STATE-ZIP	BOCA RATON, FL. 33498
TITLE	DC MO
NAME	LITTEH, JORDAN
STREET ADDRESS	10058 SPANISH ISLES BLVD, F5
CITY-STATE-ZIP	BOCA RATON, FL. 33498
TITLE	DC FO
NAME	DUBERMAN, LEWIS
STREET ADDRESS	10058 SPANISH ISLES BLVD F5
CITY-STATE-ZIP	BOCA RATON, FL. 33498
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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 10 or on an attachment with an address, with all other info empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEWIS

DUBERMAN

2/4/13

561-893 5980

Date

Daytime Phone #

CR2E034B (12/02)



Attachment 70027653
#P000000068623

February 4, 2003

DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FL. 32302-1500

RE: RELIEFRX, INC.
FEI # 65-1052788

561-883-5980 *tele*

561-852-7410 *fax*

877-902-9540 *toll free*

10058 SPANISH ISLES BLVD, SUITE F-5

BOCA RATON, FL 33498

TO WHOM IT CONCERNS:

Enclosed are the 2003 UBR and fee for the above named corporation. Also enclosed is the pre-printed UBR for 2002. For whatever reason, we did not receive the pre-printed UBR for the current year and we would appreciate if you correct your records to ensure that we receive such reports in the future.

Yours truly,

Lewis Duberman, CFO