

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

04-07-2003 90183 046 ***150.00

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1. Entity Name
LOREN AND ASSOCIATES, P.A.



Principal Place of Business
1506 NORTH EAST 162ND STREET
SUITE #300
NORTH MIAMI BEACH FL 33162

Mailing Address
1506 NORTH EAST 162ND STREET
SUITE #300
NORTH MIAMI BEACH FL 33162



2. Principal Place of Business
320 South State Road 7
Suite, Apt. #, etc.
Suite 300

3. Mailing Address
320 South State Road 7
Suite, Apt. #, etc.
Suite 300

☐ CHECK HERE IF MAKING CHANGES

City & State
Plantation, FL
Zip
33317
Country

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Plantation, FL
Zip
33317
Country

4. FEI Number 65-1029576

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

LOREN, JAMES M
1506 NORTH EAST 162ND STREET
SUITE #300
NORTH MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name: James Loren
Street Address (P.O. Box Number is Not Acceptable)
320 South State Road 7
Suite 300
City: Plantation FL Zip Code: 33317

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: *James Loren - President*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/31/03
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

TITLE: P ☐ Delete
NAME: LOREN, JAMES M
STREET ADDRESS: 1506 NORTH EAST 162ND STREET SUITE #300
CITY-ST-ZIP: NORTH MIAMI BEACH FL 33162

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
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TITLE: ☐ Delete
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CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President ☒ Change ☐ Addition
NAME: James Loren
STREET ADDRESS: 320 South State Rd. 7 - Suite #300
CITY-ST-ZIP: Plantation, FL 33317

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

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

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

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James Loren*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/03 954-585-4878
Date Daytime Phone #

CR2E034 (10/02)