

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

10/2

DOCUMENT # P00000085669

01-02

1. Entity Name

SCOTT RUBINCHIK, P.A.

FILED

02 OCT 16 AM 10:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8211 W. BROWARD BLVD.

3. Mailing Address

8211 W. BROWARD BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

200

200

City & State

City & State

PLANTATION, FL

PLANTATION, FL

Zip

33324

Country

USA

Zip

33324

Country

USA

4. FEI Number

65-1038041

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

01-02

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

SCOTT RUBINCHIK

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

8211 W. BROWARD BLVD., STE. 200

City

PLANTATION

FL

Zip Code

33324

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

Scott Rubinchnik

SCOTT RUBINCHIK

10/14/02

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

P
SCOTT RUBINCHIK
8211 W. BROWARD BLVD., STE. 200
PLANTATION, FL 33324

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

100008700471
10/30/02--01076--003 **158.75

TITLE
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CITY-ST-ZIP

100008700471
10/30/02--01076--004 **150.00

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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:

Scott Rubinchnik

SCOTT RUBINCHIK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954424-1488

Daytime Phone #

CR2E034B (12/01)

2 of 2

**SCOTT RUBINCHIK, P.A.
8211 W. BROWARD BLVD., STE. 200
PLANTATION, FL 33324**

10-14-02

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: P00000085669

To Whom It May Concern:

It has just come to my attention that my corporation has been dissolved for non-filing of its Uniform Business Report.

My mailing address has changed, and I never received my renewal form.

I have enclosed a blank report that I have filled out along with the filing fees for 2002.

Please update your records and reinstate my corporation.

Thank you,



Scott Rubinchik
President