

2001 UNIFORM BUSINESS REPORT (UBR)

pg 1 of 2

DOCUMENT # P00000111310

1. Entity Name

COLTON KAMINETSICY & MORRIS, P.A.

Principal Place of Business

3010 North Military Trail
Suite 210
Boca Raton, FL 33431

Mailing Address

3010 North Military Trail
Suite 210
Boca Raton, FL 33431

FILED

01 DEC 24 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1061541

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Dubosard & Dolnick, P.A.
3010 North Military Trail
Suite 210
Boca Raton, FL 33431

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2001 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	DIRECTOR	<input checked="" type="checkbox"/> Delete
NAME	BERNIE KAMINETSICY, M.D.	
STREET ADDRESS	1905 Clint Moore Road, Suite 302	
CITY-ST-ZIP	Boca-Raton, FL 33496	
TITLE	DIRECTOR	<input checked="" type="checkbox"/> Delete
NAME	Robert Colton, M.D.	
STREET ADDRESS	1905 Clint Moore Road	
CITY-ST-ZIP	Boca-Raton, FL 33496	
TITLE	DIRECTOR	<input type="checkbox"/> Delete
NAME	Ronnie Morris, M.D.	
STREET ADDRESS	1905 Clint Moore Road, Suite 301	
CITY-ST-ZIP	Boca-Raton, FL 33496	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CP2E034 (11/00)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

November 30, 2001

COLTON KAMINETSKY & MORRIS P.A.
3010 NORTH MILITARY TRAIL
SUITE 210
BOCA RATON, FL 33431

SUBJECT: COLTON KAMINETSKY & MORRIS P.A.
Ref. Number: P00000111310

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner
Senior Section Administrator

Letter Number: 301A00063629

DuBosar & Dolnick, P.A.

ATTORNEYS AT LAW

SUITE 210

3010 NORTH MILITARY TRAIL
BOCA RATON, FLORIDA 33431

TELEPHONE (561) 999-9322

FACSIMILE (561) 999-9690

OF COUNSEL
GARY M. KRASNA, P.A.

December 20, 2001

By U.S. Mail

Sean Toner- Senior Section Administrator
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32302-1500

**Re: Colton Kaminetsky & Morris P.A. –
Letter Number: 301A00063629**

Dear Mr. Toner:

Pursuant to your letter of November 30, 2001 I am returning the UBR form with the FEIN indicated in the appropriate block, as well as the check for \$150 filing fees. I would appreciate the process of the corrected report.

Please contact our office for any additional information. Thank you for your attention to this matter.

Very truly yours



Keren Admoni

Paralegal to Howard D. DuBosar