

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90441 039 \*\*\*150.00

**DOCUMENT # P00000113122**

**1. Entity Name**  
**SAMI OF BROWARD COUNTY, INC.**



**Principal Place of Business**  
10299 ROYAL PALM BOULEVARD  
CORAL SPRINGS FL 33065

**Mailing Address**  
10299 ROYAL PALM BOULEVARD  
CORAL SPRINGS FL 33065

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

**4. FEI Number** 65-1061904

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

TESSER, JOHN  
10299 ROYAL PALM BOULEVARD  
CORAL SPRINGS FL 33065

Name \* John Tesser  
Street Address (P.O. Box Number is Not Acceptable)  
10299 Royal Palm Blvd.  
Coral Springs  
City FL Zip Code 33065

**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** *John Tesser* **John Tesser (Pres)** **4/15/03**  
Signature (typed or printed name of registered agent and title if applicable). (NOTE: Registered Agent signature required when registering) 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**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** D ☐ Delete  
**NAME** TESSER, JOHN  
**STREET ADDRESS** 10299 ROYAL PALM BOULEVARD  
**CITY-ST-ZIP** CORAL SPRINGS FL 33065

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

**TITLE** D ☐ Delete  
**NAME** TESSER, VALERIE  
**STREET ADDRESS** 10299 ROYAL PALM BOULEVARD  
**CITY-ST-ZIP** CORAL SPRINGS FL 33065

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

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

**TITLE** ☐ Change ☐ Addition  
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**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: X**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

*John Tesser* **John Tesser (Pres)** **4/15/03** **(54) 345-5503**  
Date Daytime Phone #

CR2E034 (10/02)