2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State
04-25-2003 90177 043 ***150.00

DOCUMENT # P01000002990

1. Entity Name
STOK & ASSOCIATES, P.A.

Principal Place of Business	Mailing Address
2875 N.E. 191ST STREET SUITE 304 AVENTURA FL 33180	2875 N.E. 191ST STREET SUITE 304 AVENTURA FL 33180

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-1072427 ☐ 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
STOK, ROBERT A 2875 N.E. 191ST STREET SUITE 304 AVENTURA FL 33180	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. 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 reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STOK, ROBERT A 2875 N.E. 191ST STREET, SUITE 304 AVENTURA FL 33180	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sophia P. Stok Vice President 2875 NE 191 Street, Suite 304 Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PRICE, JILL K 2875 N.E. 191ST STREET, SUITE 304 AVENTURA FL 33180	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Abe Stok, Secretary 2875 NE 191 Street Suite 304 Aventura, FL 33180	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PACHTER, SETH W 2875 N.E. 191ST STREET, SUITE 304 AVENTURA FL 33180	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SIFF, ELLEN S 2875 N.E. 191ST STREET, SUITE 304 AVENTURA FL 33180	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP FEUERSTEIN, ANDREW S 2875 N.E. 191ST STREET, SUITE 304 AVENTURA FL 33180	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: Sophia P. Stok REQUIRED 4/20/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #