

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000005842

1. Entity Name
JAMES F. LOWY, ESQ., P.A.

FILED
Aug 11, 2002 8:00 am
Secretary of State

08-11-2002 90165 039 ***150.00

0091739 AV

Principal Place of Business
3825 HENDERSON BLVD.
SUITE 605C
TAMPA FL 33629

Mailing Address
3825 HENDERSON BLVD.
SUITE 605C
TAMPA FL 33629



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-3696909	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State			
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
LOWY, JAMES F 3825 HENDERSON BLVD. SUITE 605C TAMPA FL 33629		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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOWY, JAMES F 3825 HENDERSON BLVD. TAMPA FL 33629 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED JAMES F. LOWY 8/7/02 813-288-9525
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E034 (4/02)

Attachment



FLORIDA LAW GROUP, L.L.C.
Attorneys and Counselors at Law

PO100005842

August 7, 2002

Via Facsimile and US Mail

State of Florida
Secretary of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Re: UBR Filing—James F. Lowy, Esq., P.A.

Dear Sir or Madam,

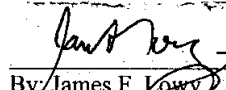
Enclosed please find the \$150 filing fee and the 2002 Uniform Business Report. I did not receive the original UBR and fee notice that is supposed to be mailed to me on May 1, 2002.

I request that any late fees incurred be waived, since I did not receive the original UBR form.

My P.A. also must pay several hundreds dollars in city and county taxes annually in order to maintain the right to be in business. A \$400 penalty for a solo practitioner earning \$17,250 in the Year 2001 (reportable income on my 2001 tax return) represents a severe penalty and hardship. Thank you in advance for your consideration.

Sincerely,

JAMES F. LOWY, ESQ., P.A.


By James F. Lowy