

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 25, 2003 8:00 am**  
**Secretary of State**

08-25-2003 90104 047 \*\*\*150.00

0131759 AT

DOCUMENT # P01000012906

1. Entity Name  
**JAMES ANDREW SANDS IV, P.A.**



Principal Place of Business  
**501 SOUTHEAST 12TH STREET  
FORT LAUDERDALE FL 33316**

Mailing Address  
**POST OFFICE BOX 030550  
FORT LAUDERDALE FL 33303-0550**



2. Principal Place of Business  
**1507 East Las Olas Blvd.**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
**Fort Lauderdale FL**

City & State

4. FEI Number **65-1074011**

Applied For  
Not Applicable

Zip  
**33301**

Country  
**USA**

Zip

Country

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

**SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134**

Name **James A. Sands, IV**  
Street Address (P.O. Box Number is Not Acceptable)  
**1507 East Las Olas Boulevard**  
City **Fort Lauderdale** FL Zip Code **33301**

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 **James A. Sands IV** **JAMES A SANDS IV PRESIDENT** **08.08.03**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**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 **PSTD**  
NAME **SANDS, JAMES A IV**  
STREET ADDRESS **1306 SOUTHEAST 17TH STREET CAUSEWAY**  
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**

TITLE **PSTD**  
NAME **James A. Sands, IV** ☒ Change ☐ Addition  
STREET ADDRESS **1507 East Las Olas Boulevard**  
CITY-ST-ZIP **Fort Lauderdale, FL 33301**

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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 **James A. Sands IV** **08.08.03** **954-832-9090**  
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (4/03)

ATTACHMENT  
#P01000012906

80140204

James Andrew Sands IV, P.A.  
PO Box 030550  
Fort Lauderdale, FL 33303-0550

August 8, 2003

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, FL 32302-1500

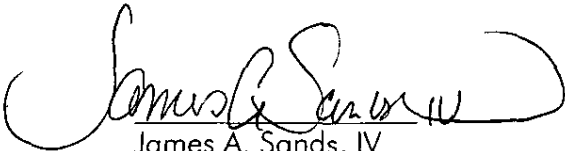
To Whom it May Concern:

UBR FILING: DOCUMENT #P01000012906  
NO PRIOR NOTICE RECEIVED; PLEASE WAIVE LATE CHARGE

Attached please find a completed 2003 Uniform Business Report as well as a filing fee in the amount of \$150.

Since this is the first notice we have received, please waive the \$400 late charge.

Sincerely yours,



James A. Sands, IV  
President  
James Andrew Sands IV, P.A.