

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000017694

1. Entity Name  
MEDICAL ILLUSTRATIONS OF SOUTH FLORIDA, INC.

FILED

02 NOV 11 PM 12:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
520 W HALLANDALE BEACH BLVD  
HALLANDALE FL 33009

Mailing Address  
520 W HALLANDALE BEACH BLVD  
HALLANDALE FL 33009

2. Principal Place of Business  
520 W. Hallandale Beach Blvd.  
Suite, Apt. #, etc.

3. Mailing Address  
520 W. Hallandale Beach Blvd.  
Suite, Apt. #, etc.

City & State  
Hallandale, FL

City & State  
Hallandale Beach, FL

Zip  
33009

Country  
USA

Zip  
33009

Country  
USA

4. FEI Number - - - - - 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

FENSTERSHEIB, ROBERT  
520 W HALLANDALE BEACH BLVD  
HALLANDALE FL 33009

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 *Robert Fenstersheib* 9/2/02  
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 \$550.00**  
**After September 15, 2002 Fee will be \$750.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FENSTERSHEIB, ROBERT 520 W HALLANDALE BEACH BLVD HALLANDALE FL 33009	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900008977379 11/13/02--01080--017 **550.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Robert Fenstersheib* 9/2/02 954-454-2488  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

LAW OFFICES OF

**ROBERT J. FENSTERSHEIB**

**ROBERT J. FENSTERSHEIB  
MICHELE F. KURTZER**

A Professional Association

520 West Hallandale Beach Boulevard  
Hallandale Beach, Florida 33009  
Broward 954.456.2488 Dade 305.945.3630  
Facsimile 954.456.2588  
LawRJF@Aol.com

**CHARLES R. MINDLIN  
SHERYLE E. BERKOWITZ**

Of Counsel

November 6, 2002

To whom it may concern,

On September 2, 2002 we sent Check 28056 in the amount of \$550.00 and a copy of the 2002 uniform Business Report. The check has not cleared the bank, so I called your office and was told to submit a new check with this letter and a copy of UBR form.

Thank you,

Robert J. Fenstersheib, Esq

