

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90137 005 ***150.00

DOCUMENT # P01000027281

1. Entity Name
FLORIDA BIOTECHNOLOGY GROUP, INC.

Principal Place of Business
7686 WILES ROAD
CORAL SPRINGS FL 33067

Mailing Address
7686 WILES ROAD
CORAL SPRINGS FL 33067



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address
20283 STATE ROAD 7

Suite, Apt. #, etc.

Suite, Apt. #, etc.
SUITE 300

City & State

City & State
BOCA RATON, FL

4. FEI Number

65-1083789

Applied For

Not Applicable

Zip

Country

Zip

Country

33498

USA

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

HAUSMAN, DEBORAH K
7000 WEST PALMETTO PARK RD., STE. 402
BOCA RATON FL 33433

Name

Street Address (P.O. Box Number is Not Acceptable)

20283 STATE ROAD 7

City
BOCA RATON, FL

FL

Zip Code

33498

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.

SIGNATURE

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 **PSD** ☐ Delete
NAME **RUBENSTEIN, ABBIE**
STREET ADDRESS **7000 WEST PALMETTO PARK RD., STE. 402**
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE ☐ Change ☐ Addition
NAME **20283 STATE ROAD 7**
STREET ADDRESS **BOCA RATON, FL 33498**
CITY-ST-ZIP

TITLE **DIRECTOR** ☐ Delete
NAME **EVAN BADER**
STREET ADDRESS **20283 STATE ROAD 7**
CITY-ST-ZIP **BOCA RATON, FL 33498**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **EVAN BADER**
STREET ADDRESS **20283 STATE ROAD 7**
CITY-ST-ZIP **BOCA RATON, FL 33498**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/02

Date

954-227-5357

Daytime Phone #

CR2E034 (9/01)