2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

P01000032397

1. Entity Name

RAYMOND G. FERRERO, III, P.A.



FILED Mar 31, 2003 8:00 am Secretary of State 03-31-2003 90181 035 ***150.00

300 SE 13 ST FT LAUDERDA	TREET ALE FL 33316		Mailing Address 300 SE 13 STREET FT LAUDERDALE FL 33316					TOOLITO				
2. Principal Place of Business				3. Mailing Address				1 30011001 111 BEIO1 113	III DADAK UNIKI UBDAK POK		01	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State			4.	FEI Number 65-11	01487	J	pplied For ot Applicable	
Zip Country			Zip	Zip Cour			5. (5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			ditional	
6. Name and Address of Current F				Registered Agent			7. 1	Name and Address o	f New Registered	Agent		
FERRERO 300 SE 13 FT LAUDE		Name Street Address (F			lox Number is Not Acc	ceptable)						
**************************************				v				FL Zip Code				
the obligat	ions of regist	y submits this statement for ered agent. or named name of registered agent	and title if app				egistered ag	einstating)	3·A	6.03		=
After Make Check	May 1, 200	3 Fee Will be \$550.00 Florida Department o	f State					9. Election Camp Trust Fund Cor		\$5.0 Added	May Be I to Fees	
10.		S OFFICERS AND	DIRECTO	RS	11.		ÄD	DITIONS/CHANGES	TO OFFICERS AN	D DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERRERO, RAYMOND G III 300 SE 13 STREET FT LAUDERDALE FL 33316			□ Delete		ET ADDRESS ST-ZIP				Change	☐ Addition	00,000
TITLE Name Street address - City-St-Zip			<u>-</u>	☐ Delete						☐ Change	☐ Addition	(
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ESS			☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
ITTLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		ľ				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete						☐ Change	Addition	
TITLE. IAME STREET ADDRESS STY-ST-ZIP		NA STI			T ADDRESS ST-ZIP			· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition		
I2. I hereby c	ertify that the	information supplied with	this filing	does not qualify for	the exer	nption state:	d in Section 1	19.07(3)(i), Florida St	atutes. I further ce	rtify that the in	formation	

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.

454-522-1130