

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

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90448 033 ***150.00

DOCUMENT # P01000075107

1. Entity Name
PROPHESEA, INC. ✓

DO NOT WRITE IN THIS SPACE

671917

2. Principal Place of Business
2 S. Biscayne Blvd.

3. Mailing Address
2 S. Biscayne Blvd.

Suite, Apt. #, etc.
Suite 3400

Suite, Apt. #, etc.
Suite 3400

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country
33131 USA

Zip Country
33131 USA

4. FEI Number
APPLIED FOR

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
Valdes-Fauli Corporate Services, Inc.

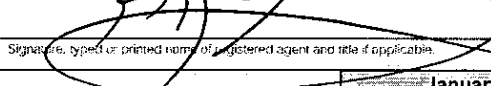
Street Address (P.O. Box Number is Not Acceptable)
2 S. Biscayne Blvd., Suite 3400

City Miami FL Zip Code
33131

**DO NOT WRITE
IN THIS SPACE**

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.

Valdes-Fauli Corporate Services, Inc.

SIGNATURE  Michael Steven Greene 4/25/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing agent.) DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DPT	Weithorn, Keith	2 S. Biscayne Blvd., Ste 3400	Miami, Florida 33131
S	Ziser, Barbara	2 S. Biscayne Blvd., Ste 3400	Miami, Florida 33131

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with an other like empowered.

SIGNATURE:  Keith Weithorn

4/25/02

(305) 376-6000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)