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

## DOCUMENT #

P01000120332

Mailing Address

1. Entity Name

Principal Place of Business

LAW OFFICE OF RICHARD T. DONATO, P.A., INC.

7700 DAVIE RD EXTENSION HOLLYWOOD FL 33024		7700 DAVIE RD EXT	7700 DAVIE RD EXTENSION HOLLYWOOD FL 33024						
2. Principal F	Place of Business	3. Mailing Address	3. Mailing Address			<b> </b>	<b>        </b>		
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Number 30-0020	0224	_ <del>  `</del>	plied For t Applicable	
Zip	p Country Zip		Country		5. Certificate of Status Des	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 Ag	gent		
			t	Name	Ī				
	, RICHARD T		Street Addre		ss (P.O. Box Number is Not Acceptable)				
	/ie RD extension		_		·				
HOLLYWO	OOD FL 33024								
				City		FL	Zip Code	9	
	e named entity submits this statement tions of registered agent.  Signature, typed or printed name of registered		ng its registered (			DATE	militar with,	and accept	
<u>, '</u>	<del></del>		(NOTE: Negistered Ag	ant signature requir	ou miori onistating)	- DAIL			
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550 k Payable to Florida Departme	0.00			9. Election Campa Trust Fund Cont	• • –		May Be to Fees	
10.		AND DIRECTORS	11.		ADDITIONS/CHANGES TO	O OFFICERS AND I	DIRECTORS	S IN 11	
TITLE NAME Street address City-St-Zip	DPS DONATO, RICHARD T 7700 DAVIE RD EXTENSION HOLLYWOOD FL 33024	☐ Delete	TITLE NAME STREET A CITY-ST-				<b>□</b> Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST-	1	Trombook in apple .		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST-				Change	Addition	
ITLE IAME Street Address City-St-Zip		☐ Delete	TITLE NAME STREET AI CITY-ST-	1			Change	Addition	
ITLE IAME STRÉET ADDRESS. CITY-ST-ZIP	, generation menoricaliza comparety has m <sub>enor</sub> a	, 17 🗀 50000	TITLE NAME STREET A	[	\$		Change	☐ Addition	
TITLE		Delete				Ţ	Change	Addition	

SIGNATURE:

CITY-ST-ZIP

EORECHARD T. DONATO

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 the empowered.

3/21/03

(954)964-0000

**FILED** 

03-26-2003 90160 035 \*\*\*150.00

Mar 26, 2003 8:00 am § Secretary of State