

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2003 8:00 am
Secretary of State

03-04-2003 90058 049 ***150.00

DOCUMENT # P02000026391

1. Entity Name
PRATT & RATZAN, INC.



Principal Place of Business
**2000 TOWERSIDE TERRACE STE 2110
MIAMI FL 33138**

Mailing Address
**2000 TOWERSIDE TERRACE STE 2110
MIAMI FL 33138**



2. Principal Place of Business
3015 QUAYSIDE LANE

3. Mailing Address
3015 QUAYSIDE LANE

Suite, Apt. #, etc.
SUITE 200

Suite, Apt. #, etc.
SUITE 200

City & State
MIAMI, FL

City & State
MIAMI, FL

Zip
33138

Country
USA

Zip
33138

Country
USA

4. FEI Number
04-3628094

Applied For
☐ Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**FITZGERALD, JOHN E JR
9165 PARK DR
MIAMI SHORES FL 33138**

7. Name and Address of New Registered Agent

Name **CATHLEEN R. PRATT**
Street Address (P.O. Box Number is Not Acceptable)
3015 QUAYSIDE LANE
SUITE 200
City **MIAMI** FL Zip Code **33138**

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 **Cathleen Pratt**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/28/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PRATT, CATHLEEN R 2000 TOWERSIDE TERRACE STE 2110 MIAMI FL 33138 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RATZAN, JILL 2000 TOWERSIDE TERRACE STE 2110 MIAMI FL 33138 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE **Cathleen Pratt** **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/28/03

CR2E034 (10/02)