

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

FILED
Apr 22, 2003 8:00 am
Secretary of State

04-22-2003 90043 028 ***150.00

DOCUMENT # **P02000037023**

1. Entity Name

R. A. MANN FLORIDA INC.



DO NOT WRITE IN THIS SPACE

90100523

2. Principal Place of Business
2100 N. OCEAN BL.

3. Mailing Address
2100 N. OCEAN BL.

Suite, Apt. #, etc.
SUITE 2102

Suite, Apt. #, etc.

SUITE 2102

City & State
FT. LAUDERDALE, FL

City & State
FT. LAUDERDALE, FL

4. FEI Number
82-0538720

Applied For
Not Applicable

Zip
33305

Country
USA

Zip
33305

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ROBERT A. MANN

Street Address (P.O. Box Number is Not Acceptable)
2100 N. OCEAN BL., # 2102

City **FT. LAUDERDALE** FL Zip Code **33305**

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 **Robert A. Mann**

(NOTE: Registered Agent signature required when reinstating)

4-17-03

DATE

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
ROBERT A. MANN
2100 N. OCEAN BL., # 2102
FORT LAUDERDALE, FL 33305**

TITLE
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IN THIS SPACE**

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

SIGNATURE: **Robert A. Mann** **ROBERT A. MANN**

4-17-03

Date

954-565-1530

Daytime Phone #

CR2E034B (12/02)