

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

1/3

01-31-2003 90130 018 ***150.00

DOCUMENT # P02000047528

1. Entity Name
PRIORITY MANAGEMENT, INC.



Principal Place of Business
6153 NORTHWEST 74TH COURT
PARKLAND FL 33067

Mailing Address
6153 NORTHWEST 74TH COURT
PARKLAND FL 33067

2. Principal Place of Business

3. Mailing Address
6320 NW 72nd Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Parkland FL

Zip

Country

Zip
33067

Country
USA

4. FEI Number
02-0593217

Applied For

☒ Not Applicable

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 Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

Name
Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 **Richard M Linz President**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/25/03
DATE

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 **PSD** ☐ Delete
NAME **LINZ, RICHARD M**
STREET ADDRESS **6153 NORTHWEST 74TH COURT**
CITY-ST-ZIP **PARKLAND FL 33067**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VTD** ☐ Delete
NAME **MILLER, STUART I**
STREET ADDRESS **6153 NORTHWEST 74TH COURT**
CITY-ST-ZIP **PARKLAND FL 33067**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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: **SIGNATURE RICHARD M. LINZ**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/03 (59) 417-4770
Date Daytime Phone #

CR2E034 (10/02)