

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

02-17-2003 90171 024 ***150.00

DOCUMENT # P02000081159

1. Entity Name
LAW OFFICES OF SCOTT A. WEINSTEIN, P.A.



Principal Place of Business
**3279 CLINT MOORE ROAD, #207
BOCA RATON FL 33496**

Mailing Address
**3279 CLINT MOORE ROAD, #207
BOCA RATON FL 33496**

2. Principal Place of Business
**8751 W. Broward Blvd
Suite, Apt., etc. 201**

3. Mailing Address
**8751 W. Broward Blvd
Suite, Apt., etc. 201**

City & State
Plantation FL

City & State
Plantation FL

Zip Country
33324 Broward

Zip Country
33324 Broward

4. FEI Number
13-4208076

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**WEINSTEIN, SCOTT A
3279 CLINT MOORE ROAD, #207
BOCA RATON FL 33496**

7. Name and Address of New Registered Agent

Name **Scott A Weinstein**
Street Address (P.O. Box Number is Not Acceptable)
8751 W. Broward Blvd, Ste 201
City **Plantation** State **FL** Zip Code **33324**

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 **Scott Weinstein**
Signature, typed or printed name of registered agent and title if applicable.

2-13-03
DATE

(NOTE: Registered Agent signature required when reinstating)

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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WEINSTEIN, SCOTT A	
STREET ADDRESS	3279 CLINT MOORE ROAD, #207	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Scott Weinstein	
STREET ADDRESS	8751 W. Broward, Blvd Ste 201	
CITY-ST-ZIP	Plantation, FL 33324	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: Scott A. Weinstein 3-13-03 954-248-4860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)