

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

08-22-2003 90108 045 ***150.00

0043361 AV

DOCUMENT # P02000086484

1. Entity Name

ROSA MALNATI DPM, INC



Principal Place of Business

**3185 SW 8TH ST.
MIAMI FL 33135**

Mailing Address

**3185 SW 8TH ST.
MIAMI FL 33135**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-4507443

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MALNATI, ROSA

251 174TH ST., APT. 1405

SUNNY ISLES BCH FL 33160

New Address →

7. Name and Address of New Registered Agent

Name *Same*

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

3225 NE 184TH ST, #10104

City *Aventura*

FL

Zip Code **33160**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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

TITLE ☐ Delete
NAME **PD MALNATI, ROSA**
STREET ADDRESS **251 174TH ST., APT. 1405**
CITY-ST-ZIP **SUNNY ISLES BCH FL 33160**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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CITY-ST-ZIP

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NAME
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3225 NE 184TH ST, #10104**
CITY-ST-ZIP **Aventura, FL 33160**

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/03

Date

(305) 772-5882

Daytime Phone #

CR2E034 (4/03)

Attachment 86140056
GERSTLE, ROSEN & ASSOCIATES, P.A.

Certified Public Accountants

Mark R. Gerstle, C.P.A.

Robert N. Rosen, C.P.A.

August 20, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302

re: Rosa Malnati, DPM, Inc.

EIN 36-4507443

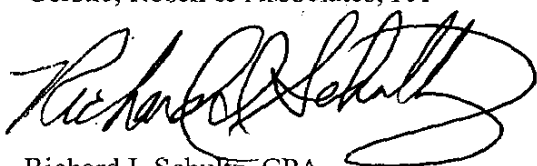
Doc. #P02000086484

Dear Sir or Madam,

Enclosed, please find the 2003 Uniform Business Report for the above mentioned company and a check for \$150. The officer has informed me that she never received the original reporting form that was mailed in the early part of this year. She did not realize that the report had not been filed until receiving the "second request" package. This was the first time the officer was aware of filing the report due to being incorporated in August 2002. We ask for your indulgence this one time, and accept the enclosed payment of \$150.00. This should not happen again as the officer is aware of the annual filing that must be done before May 1 of each year.

Thank you for your cooperation in this matter.

Yours truly,
Gerstle, Rosen & Associates, PA



Richard I. Schultz, CPA

For The Firm

enclosures

One Turnberry Place

19495 Biscayne Boulevard, Suite 705A, Miami, Florida 33180

Aventura, Florida 33180

Dade (305) 937-0116

Broward (954) 389-1616

Boca Raton (561) 347-8917

Palm Beach (561) 687-2192

Fax (305) 937-0128

Compson Financial Center

980 North Federal Highway

Suite 205

Boca Raton, Florida 33432

Phone (561) 447-4000

Fax (561) 447-4004

5100 Tamiami Trail North

Suite 103

Naples, Florida 34103

Phone: (239) 262-1773

Fax: (239) 263-0166