# 2003 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 22, 2003**
**Secretary of State**

DOCUMENT# P02000101679

**Entity Name:** IRAVANI AND ASSOCIATES, P.A.

**Current Principal Place of Business:**

PO BOX 292106
TAMPA, FL 33687

**New Principal Place of Business:**

18119 PORTSIDE STREET
TAMPA, FL 33647

**Current Mailing Address:**

PO BOX 292106
TAMPA, FL 33687

**New Mailing Address:**

**FEI Number: 38-3660597** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

IRAVANI, SAID
8723 ISLAND BREEZE LANE
TAMPA, FL 33637 US

**Name and Address of New Registered Agent:**

IRAVANI, SAID
18119 PORTSIDE STREET
TAMPA, FL 33647 US

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.

SIGNATURE: SAID IRAVANI 04/22/2003
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete
Name: IRAVANI, SAID
Address: 8723 ISLAND BREEZE LANE
City-St-Zip: TAMPA, FL 33637

Title: VPD (X) Delete
Name: KOZUH, WILLIAM J
Address: 4411 POWDER HORN DRIVE
City-St-Zip: DAYTON, OH 45432

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAID IRAVANI PSD 04/22/2003
Electronic Signature of Signing Officer or Director Date