

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

02-01-2002 90037 015 ***150.00

DOCUMENT # P92000006274

1. Entity Name

HERMAN I. LEVIN, PH.D., INC.

Principal Place of Business

**9650 SOUTH OCEAN DR.
 APT. 1603
 JENSEN BEACH FL 34957**

Mailing Address

**9650 SOUTH OCEAN DR.
 APT. 1603
 JENSEN BEACH FL 34957**

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

65-0373348

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

**LEVIN, HERMAN I PHD
 APT. 1603, 9650 S. OCEAN DRIVE
 JENSEN BEACH FL 34957-2305**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 13, 2002 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **DPVS**
 STREET ADDRESS **LEVIN, HERMAN I PH.D.**
 CITY-ST-ZIP **9650 S. OCEAN DR., APT. 1603
 JENSEN BEACH FL 34957**

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

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **LEVIN, HERMAN I PH.D.**
 CITY-ST-ZIP **9650 S. OCEAN DR., APT. 1603
 JENSEN BEACH FL 34957**

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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 CITY-ST-ZIP

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

13. 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 11 or Block 12 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

Date

Daytime Phone #

CR2E034 (4/02)

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P92000006274**

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HERMAN I. LEVIN, PH.D., INC.

Principal Place of Business

**9650 SOUTH OCEAN DR.
APT. 1603
JENSEN BEACH FL 34957**

Mailing Address

**9650 SOUTH OCEAN DR.
APT. 1603
JENSEN BEACH FL 34957**

2. Principal Place of Business

2550 S.E. Walton Rd

3. Mailing Address

Suite, Apt. #, etc.

City & State

A. St Lucie, FL

City & State

Zip

Country

34952

FL St. Lucie

Zip

Country

4. FEI Number

65-0373348

Applied For

Not Applicable

5. Certificate of Status Desired ☐

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(See criteria on back)



HIDE NOW!!! FEE: \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPVS LEVIN, HERMAN I PH.D. 9650 S. OCEAN DR., APT. 1603 JENSEN BEACH FL 34957	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ORIGINAL WAS SIGNED

38996 COPY

Attachment

DO NOT WRITE IN THIS SPACE

Attachment

38996

#P92000006274

HERMAN I. LEVIN, PH.D., INC.
P.O. BOX 6081
JENSEN BEACH, FL 34957

722037 3430

63-643/670
BRANCH 13095

PAY TO THE ORDER OF *Wesley Stull*

DATE *11/15/90*

One hundred fifty dollars

\$ 150.00

DOLLARS

FOR *First Union*

First Union National Bank
Firstunion.com
N/T 06/006432

003430 067006432 2090000019258 0000015000

Attachment
DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT# 1009068796

FEB 01 2002

#P92000006274

2111 63346

FEB -5 02

BANK OF AMERICA NA
1009068796 02/05/02

FEDERAL RESERVE BOARD OF GOVERNORS REG. CC



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