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2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment wil

SIGNATURE:

Jul 31, 2001 8:00 am P92000006363 DOCUMENT # **Secretary of State** 1. Entity Name RUBINO & ASSOCIATES, P.A. 07-31-2001 90007 035 ***150.00 Principal Place of Business Mailing Address 159 LOOKOUT PL 159 LOOKOUT PL 80060917 STE 101 STE 101 MAITLAND FL 32751 MAITLAND FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. OO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3150858 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent RUBINO, NICHOLAS J Street Address (P.O. Box Number is Not Acceptable) 159 LOOKOUT PL, STE 101 SUITE 150 MAITLAND FL 32751 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete ☐ Change Addition TITLE TITLE RUBINO, NICHOLAS J NAME NAME STREET ADDRESS 159 LOOKOUT PL STE 101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAITLAND FL ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE . 🔲 , Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 invitee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

A PRO

LAW OFFICES
Rubino & Associates
PROFESSIONAL ASSOCIATION

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Nicholas J. Rubino* Catherine E. Davey Kenneth Andrews

*Florida Board Certified Wills, Trusts and Estates Attorney

July 24, 2001

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: Rubino & Associates, P.A.

Dear Sir or Madam:

The undersigned is in receipt of the Uniform Business Report for the year 2001. I note that a late fee of \$400 has been assessed against this corporation. However, no previous Uniform Business Report was ever received by the undersigned. Therefore, after consultation with an operator at your agency and following that individual's advice and guidance, enclosed please find our check in the amount of \$150 for the filing of the Uniform Business Report. I would ask that you waive any penalties as the original Uniform Business Report was not received.

Should you have any questions regarding the above, please do not hesitate to contact me at your convenience.

Sincerely yours,

Rubino & Associates, P.A.

Nicholas J. Rubino, Esq.

NJR Enclosures

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