

**2003 FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90528 041 ***150.00

DOCUMENT # P92000008419

1. Entity Name
AIMEE BERNSTEIN & ASSOCIATES, INC.



Principal Place of Business
1827 MIDDLE RIVER DRIVE
APT 13
FT. LAUDERDALE FL 33305
US

Mailing Address
1126 S FEDERAL HWY
STE 326
FT LAUDERDALE FL 33316

2. Principal Place of Business

5217 East Lakes Drive

3. Mailing Address

Same as place of biz

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State
Deerfield Beach FL

City & State

4. FEI Number **65-0363335**

Applied For
Not Applicable

Zip
33064

Country
US

Zip

Country

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

BERNSTEIN, AIMEE
1126 S FEDERAL HWY
STE 326
FT LAUDERDALE FL 33316

see above

Name
Bernstein Aimee

Street Address (P.O. Box Number is Not Acceptable)
5217 East Lakes Drive

Deerfield Beach

City

FL

Zip Code
33064

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 \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **BERNSTEIN, AIMEE**
STREET ADDRESS **1126 S FEDERAL HWY #326**
CITY-ST-ZIP **FT LAUDERDALE FL 33316** *see above*

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: *Aimee Bernstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/03 (954) 421-0368

Date

Daytime Phone #

CR2E034 (10/02)