2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000003705

FILED
02 JUL -9 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Entity Name

ROBERT M. WEINBERGER, P.A.

Principal Place of Business	Mailing Address
712 U.S. Highway One No. Palm Beach, FL 33408 US	712 U.S. Highway One No. Palm Beach, FL 33408 US

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 65-0392631 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Robert M. Weinberger, Esquire
712 U.S. Highway 1, Suite 400
North Palm Beach, FL 33408

7. Name and Address of New Registered Agent

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.

SIGNATURE: [signature] 7/8/02
Signature, typed or printed name of Registered Agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. Capital Contributions as stated on record.

10. Amount of Capital Contributions in FLORIDA to date.

[redacted] PAYABLE TO DEPT OF STATE [redacted] FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION	13. ADDRESS CHANGES ONLY
DOCUMENT #	
NAME: D WEINBERGER, ROBERT M.	
STREET ADDRESS: 712 U.S. Highway One	
CITY-ST-ZIP: No. Palm Beach, FL 33408	
DOCUMENT #	
NAME	
STREET ADDRESS	
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[redacted] -06/05/02--01058--006
****600.00 -****150.00

CR2E003 (11/00)

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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: [signature] Robert M. Weinberger 7/8/02 561/844-3600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #