

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

DOCUMENT # P94000000104

1. Entity Name

STEVEN E. SIFF, P.A.

FILED

02 APR 23 12:11:35

RECEIVED  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

201 South Biscayne Blvd.

3. Mailing Address

Same

Suite, Apt. #, etc.

22nd Floor

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

4. FEI Number

65-0466638

Applied For

Not Applicable

Zip

33131

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Steven E. Siff

Street Address (P.O. Box Number is Not Acceptable)

c/o McDermott Will & Emery

210 S. Biscayne Blvd., 22nd Floor

City

Miami

FL

Zip Code

33131

**DO NOT WRITE  
IN THIS SPACE**

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, 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) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Steven E. Siff,  
201 South Biscayne Blvd., #2200  
Miami, Florida 33131

TITLE  
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-04/30/02--01012--019  
\*\*\*\*150.00 \*\*\*\*150.00

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven E. Siff

Date

Daytime Phone #

Dec 4/22/02 305347-6511

CR2E034B (12/01)