

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90025 032 ***150.00

0288476

DOCUMENT # P94000002518

1. Entity Name

RICHARD A. WEINSTOCK, D.O., P.A.

Principal Place of Business

**2151 45TH STREET
 #107
 WEST PALM BCH FL 33407
 US**

Mailing Address

**8590 BEACONHILL RD
 PALM BEACH GARDENS FL 33410
 US**

00018069



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

709 Maritime Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

N. Palm Beach, FL

4. FEI Number **65-0458490**

Applied For

Not Applicable

Zip

Country

Zip

Country

33410

USA

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

**WEINSTOCK, RICHARD A
 2151 45 ST
 107
 WEST PALM BCH FL 33407**

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, 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 \$150.00
 After MAY 1, 2001 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 **DP** ☐ Delete
 NAME **WEINSTOCK, RICHARD A D.O.**
 STREET ADDRESS **8950 BEACONHILL ROAD**
 CITY-ST-ZIP **PALM BEACH GARDENS FL**

TITLE ☒ Change ☐ Addition
 NAME **709 Maritime Way**
 STREET ADDRESS **N Palm Beach, FL**
 CITY-ST-ZIP **33410**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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 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 and that I am empowered.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD WEINSTOCK

Date

2/7/01

Daytime Phone #

(561)

691-9391

CR2E034 (10/00)