

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

05-27-2003 90165 050 ***150.00

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DOCUMENT # P94000027980

1. Entity Name

A ASTUTE INVESTMENT & MANAGEMENT, INC.



Principal Place of Business

**8400 NW 196 TERRACE
MIAMI LAKES FL 33015**

Mailing Address

**8400 NW 196 TERRACE
MIAMI LAKES FL 33015**

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

65-0500929

Applied For

Not Applicable

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

**MORALES, RICKY
8400 NW 196 TERRACE
MIAMI LAKES FL 33015**

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. 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	<input type="checkbox"/> Delete
NAME	MORALES, VINCENT	
STREET ADDRESS	8400 NW 196 TERRACE	
CITY-ST-ZIP	MIAMI LAKES FL 33015	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORALES, MARTHA	
STREET ADDRESS	8400 NW 196 TERRACE	
CITY-ST-ZIP	MIAMI LAKES FL 33015	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORALES, RICKY	
STREET ADDRESS	8400 NW 196 TERRACE	
CITY-ST-ZIP	MIAMI LAKES FL 33015	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORALES, ANNETTE	
STREET ADDRESS	8400 NW 196 TERRACE	
CITY-ST-ZIP	MIAMI LAKES FL 33015	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

ATTACHMENT
90121451
P94000057980
FREDRIK S. LIPPMAN, CPA, PA
Certified Public Accountant

WACHOVIA BANK BUILDING
3325 HOLLYWOOD BOULEVARD
HOLLYWOOD, FLORIDA 33021
(954) 961-5400
FAX (954) 961-5478

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

May 22, 2003

Division of Corporations
Uniform Business Report filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

RE: Norman Wiesenthal, M.D., P.A.
2003 Uniform Business Report
Document # 632004

Enclosed please find:

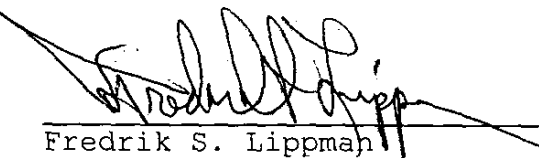
1. The 2003 Uniform Business Report for Norman Wiesenthal, M.D., P.A.
2. A check for \$ 150.00.

As a physician, Dr. Wiesenthal depends on his office staff to take care of items of this nature. In the past few months he has had staffing problems and just yesterday found the enclosed form (which was misplaced by one of his employees).

In the past, Dr. Wiesenthal has always filed tax forms on a timely basis. (including his Corporation's Uniform Business Report).

For the above reasons, we respectfully request the late fee of \$ 400.00 be waived.

Very truly yours,


Fredrik S. Lippman
Certified Public Accountant
FSL:era
Enclosures
cc: Norman Wiesenthal, M.D., P.A.