2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P94000056274

Mailing Address

SUITE B-1

4741 ATLANTIC BLVD

1. Entity Name

DAVID B. SACKS, P.A.

Principal Place of Business

4741 ATLANTIC BLVD

JACKSONVILLE FL 32207

SIGNATURE:

SUITE B-1

FILED Jan 15, 2003 8:00 am Secretary of State

01-15-2003 90198 005 ***150.00

Daytime Phone #

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| Suite, Apt. #, etc. Suite, Apt. ### | | | | | | CHECK HER | E IF MAKING C | | lied For | |
| City & State Truckson ville Fl. on Jackson ille | | | ille 1 | 76_ | 4. | 59-326485 | | | Applicable | |
| 3890 | Duval- | 52007. | | 3A. | | Certificate of Status Desired Name and Address of Nev | ' → L Fe | e Required | Ional | |
| \$ | 6. Name and Address of Current | Registered Agent | | Neme | | | | | | |
| | • | | | DAVID B. SACKS | | | | | | |
| SACKS, DA | VID B | | | Syeet Address (P.D. Box Number is Not Acceptable) De # 703 | | | | | | |
| 4741-ATLA | ntic blyddavid | | ļ | 100 | 7 AH | <u> </u> | <u> </u> | | | |
| JACKSONV | VILLE FL 32-207B | • | | | | | | | | |
| | | | | City | ACK | sonville. | FL Stands Law for | Zin Code | 20-7 | |
| 3. The above | named entity submits this statement for | or the purpose of chang | ing its registere | ed office or r | egistered ag | gent, or both, in the State of | Florida. I am far | milar with, a | ilu accept | |
| the obligation | ons of registered agent. | | | | | | _ | | | |
| SIGNATURE _ | Signature, typed or printed name of registered agen | t and title if applicable. | (NOTE: Registere | d Agent signatur | required when | rainstating) | DATE | | | |
| | | | | | | | | | ا ي | |
| FI | LE NOW!!! FEE IS \$150.00 | Ì | | | | Election Campaigr Trust Fund Contrib | | | May Be to Fees | |
| After | May 1, 2003 Fee will be \$550.00 Payable to Florida Department of | of State | | | | Trust Fund Contino | ,110H | 710000 | | |
| Make Check | | | 11. | | A | DDITIONS/CHANGES TO | OFFICERS AND D | DIRECTORS | IN 11 | |
| 10. | OFFICERS AND | | | f | 1108 | TOTEVIE - | | Change | ☐ Addition | |
| TITLE | D | ☐ Delet | IR INAM | | SACK | S DAVID B |)· ¬ | 4 000 | つ | |
| NAME | SACKS, DAVID B | | | EET ADDRESS | 1900 | ART MUSC | im De | + 20. | つ | |
| STREET ADDRESS | 353 E. FORSYTH STREET | | | r-ST-ZIP | SAC | Kspnille, | 7 3 7 7 | 10 <u>' [</u> | | |
| CITY-ST-ZIP | JACKSONVILLE FL | Delei | to TITL | † | <u> </u> | | | Change | ☐ Addition | |
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| OUTS 4 07 7/D | | | | TY-ST-ZIP | | | | | | |
| 45 I baraby | certify that the information supplied v | vith this filing does not o | qualify for the ex | emption sta | ted in Section | on 119.07(3)(i), Florida Stati | utes. I further cert | iity that the i im an officer | Intormation r or director | |
| indicated of the co | g on this report of supplemental repor | t is true and accurate a noowered to execute this a with all other like emo | ind that my sign is report as requestions. | ature snail r uired by Cha | apter 607, | lorida Statutes; and that my | name appears in | i Block 10 o | ir Block 11 if | |