

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90251 023 ***150.00

DOCUMENT # P94000069870

1. Entity Name
ENDOMAGNET CORPORATION



Principal Place of Business
4700 SHERIDAN STREET
BUILDING M
HOLLYWOOD FL 33021
US

Mailing Address
4700 SHERIDAN STREET
BUILDING M
HOLLYWOOD FL 33021
US

2. Principal Place of Business

3. Mailing Address
21150 POINT PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.
APT 503 (503)

City & State

City & State
AVENTURA, FL

Zip

Country

Zip
33180

Country

4. FEI Number 65-0520789

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

SCHWARTZ, JOSEPH L
4040 SHERIDAN ST
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name JOSEPH L. SCHWARTZ
Street Address (P.O. Box Number is Not Acceptable)
2435 HOLLYWOOD BLVD
City HOLLYWOOD FL Zip Code 33020

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 Joseph L. Schwartz DATE 2/13/2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 ☐ \$5.00 May Be Added to Fees
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE PSD
NAME DIAMOND, JEFFREY A ☐ Delete
STREET ADDRESS 4700 SHERIDAN STREET, BLDG. M
CITY-ST-ZIP HOLLYWOOD FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE JEFFREY A. DIAMOND ☒ Change ☐ Addition
NAME
STREET ADDRESS 21150 POINT PL. APT 503
CITY-ST-ZIP AVENTURA, FL 33180

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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: Jeffrey A. Diamond
Signature and typed or printed name of signing officer or director

2/12/2003 305-792-5458
Date Daytime Phone #

CR2E034 (10/02)