

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000001055

1. Entity Name
DAVID L. ZEDECK P.A.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90144 001 ***450.00

Principal Place of Business

1820 N.E. 163RD STREET
N MIAMI BEACH FL 33162

Mailing Address

1820 N.E. 163RD STREET
N MIAMI BEACH FL 33162-4801

2. Principal Place of Business

1776 N Pine Island Rd.

3. Mailing Address

1776 N Pine Island Rd.

Suite, Apt. #, etc.

Suite 326

Suite, Apt. #, etc.

326

City & State

Plantation FL

City & State

Plantation FL

Zip

33322

Country

US

Zip

33322

Country

US

4. FEI Number

65-0550591

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZEDECK, DAVID L
1820 N.E. 163RD STREET NORTH
MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name David L Zedek

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

1776 N Pine Island Rd Suite 326

City Plantation

FL

Zip Code 33322

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, 2000 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

TITLE D
NAME ZEDECK, DAVID L
STREET ADDRESS 1820 N.E. 163RD STREET NORTH
CITY-ST-ZIP MIAMI BEACH FL 33162 ☐ Delete

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P.D.
NAME David L. Zedek ☒ Change ☐ Addition
STREET ADDRESS 1776 N Pine Island Rd Suite 308
CITY-ST-ZIP Plantation FL 33322

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

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)