

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P95000059205**

1. Entity Name
BORISKIN MENTAL HEALTH SERVICES, INC.



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

01-27-2003 90203 042 ***150.00

Principal Place of Business
**11814 WATERCREST LANE
BOCA RATON FL 33498**

Mailing Address
**11814 WATERCREST LANE
BOCA RATON FL 33498**



2. Principal Place of Business

23117 ADDISON LAKES CIR

Suite, Apt. #, etc.

3. Mailing Address

8130 GLADES ROAD

Suite, Apt. #, etc.

396

☒ CHECK HERE IF MAKING CHANGES

City & State
Boca Raton, FL

City & State
Boca Raton, FL

4. FEI Number **65-0606539**

Applied For
Not Applicable

Zip
33433

Country
USA

Zip
33434

Country
USA

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

6. Name and Address of Current Registered Agent

**WEINBERG, STEVEN
% FRANK EFFMAN & WEINBERG, P.A.
8000 PETERS ROAD, SECOND FLOOR
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BORISKIN, JERRY A
11814 WATERCREST LANE
BOCA RATON FL 33498** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BORISKIN, WENDY
11814 WATERCREST LANE
BOCA RATON FL 33498** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**8130 GLADES ROAD #396
BOCA RATON, FL 33434** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**8130 GLADES ROAD #396
BOCA RATON, FL 33434** ☒ Change ☐ Addition

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

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☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Wendy Boriskin **REQUIREMENTS BORISKIN, Secretary** **01/24/03** **561** **703-6106**

Daytime Phone #

CR2E034 (10/02)