

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90129 047 ***150.00

DOCUMENT # P95000069329

1. Entity Name
RICHARD E. BRODSKY, P.A.



Principal Place of Business
**25 SE 2ND AVE
STE 919
MIAMI FL 33131**

Mailing Address
**25 SE 2ND AVE
STE 919
MIAMI FL 33131**

2. Principal Place of Business
SUITE 340

3. Mailing Address
SUITE 340

Suite, Apt. #, etc.
3059 GRAND AVE.

Suite, Apt. #, etc.
3059 GRAND AVE.

City & State
MIAMI, FLORIDA

City & State
MIAMI, FLORIDA

Zip Country
33133 MIAMI-DADE

Zip Country
33133 MIAMI-DADE

4. FEI Number **65-0609392**

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

**ALHAMBRA REGISTERED AGENTS, INC.
2 ALHAMBRA PLAZA
SUITE 1202
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **RICHARD E. BRODSKY**
Street Address (P.O. Box Number is Not Acceptable)
3059 GRAND AVE., SUITE 340
City **MIAMI, FL** Zip Code **33133**

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 **Richard E. Brodsky**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/13/03
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	PT	<input type="checkbox"/> Delete
NAME	BRODSKY, RICHARD E	
STREET ADDRESS	25 SOUTHEAST SECOND AVENUE STE 919	
CITY-ST-ZIP	MIAMI FL 33131	
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"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRODSKY, RICHARD E.	
STREET ADDRESS	SUITE 340, 3059 GRAND AVE.	
CITY-ST-ZIP	MIAMI, FLORIDA 33133	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 another like empowered.

SIGNATURE: **Richard E. Brodsky**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)