AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV 20 PM 5:56

900004706739--3
-12/05/01--01081--008
*****61.25 *****61.25

DOCUMENT # P96000000081

1. Entity Name

MYLES H. MALMAN, P.A.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
12955 BISCAYNE BLVD SUITE 202 NO MIAMI FL 33181	12955 BISCAYNE BLVD SUITE 202 NO MIAMI FL 33181

2. Principal Place of Business	3. Mailing Address
3230 STIRLING RD	3230 STIRLING RD
Suite, Apt. #, etc. SUITE 1	Suite, Apt. #, etc. SUITE 1
City & State HOLLYWOOD FL	City & State HOLLYWOOD FL
Zip 33021 Country USA	Zip 33021 Country USA

4. FEI Number 65-0629200 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COHEN, JEFFREY R 297 SUNNY ISLES BLVD. NO MIAMI BEACH FL 33160	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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MALMAN, MYLES H. 12955 BISCAYNE BLVD. STE 202 NO MIAMI BEACH FL 33181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MALMAN, MYLES H. 3230 STIRLING RD STE 1 HOLLYWOOD FL 33021	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD MALMAN, JILL A 12955 BISCAYNE BLVD STE 202 NO MIAMI BEACH FL 33181	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD MALMAN, JILL A 3230 STIRLING RD STE 1 HOLLYWOOD FL 33021	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ROSENTHAL, JONATHAN H. 3230 STIRLING RD STE 1 HOLLYWOOD, FL 33021	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/00)

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: Jill A Malman 11/2/01 954-322-0065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #