

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000007942

1. Entity Name

FINANCIAL ASSISTANCE SERVICES, INC.

FILED

00 AUG -2 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

1134 CRYSTAL DRIVE  
PALM BEACH GARDENS FL 33418

Mailing Address

1134 CRYSTAL DRIVE  
PALM BEACH GARDENS FL 33418

2. Principal Place of Business

104 ST EDWARD PL  
Suite, Apt. #, etc.

3. Mailing Address

104 ST EDWARD PL  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm Beach Gardens FL  
Zip 33418 Country USA

City & State

Palm Beach Gardens FL  
Zip 33418 Country USA

4. FEI Number

65-0650017

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

FRONSTIN, MICHAEL H

1134 CRYSTAL DRIVE 104 ST EDWARD PL  
PALM BEACH GARDENS FL 33418

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

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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 PST  
NAME FRONSTIN, MICHAEL H  
STREET ADDRESS 1134 CRYSTAL DRIVE 104 ST EDWARD PL  
CITY-ST-ZIP PALM BEACH GARDENS FL 33418

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
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CITY-ST-ZIP

☐ Change

☐ Addition

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:

MICHAEL FRONSTIN MICHAEL FRONSTIN 7/27/00 571-691-4290  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CF E034 (5/00)

**Michael H. Fronstin, M.D.**

Financial Assistance Services, Inc.

104 St. Edward Pl.  
Palm Beach Gardens  
Florida 33418

(561) 691-4290  
Fax (561) 691-4297  
E-mail: MFRONSTIN@AOL.COM

Division of Corporations, State of Florida  
PO Box 1500  
Tallahassee, FL 32302

7/27/00

Dear Sir -

I just received a 2<sup>nd</sup> notice in the 2000 UBR.  
This was sent to my previous address & was  
forwarded to me. Unfortunately, the postal office  
never forwarded the initial (1<sup>st</sup>) notice.  
Accordingly, I am requesting a waiver of  
the \$400 fine & an enclosing a check  
for \$150 which I hope will be acceptable.

Very truly yours

Michael Fronstin  
Financial Assist. Services

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