## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P96000064567** 1. Entity Name ASTROPATH, INC. Principal Place of Business Mailing Address SEES N FED HWY 3200 N FED HWY STE 206-18 -- 206-18 - RATON FL 33431 **BOCA RATON FL 33431** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Zip Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

BERMAN, LEONARD

**BOCA RATON FL 23343** 

9. This corporation is eligible to satisfy its Intangible

BERMAN, LEONARD

6499 NE 7TH AVE 4

**BOCA RATON FL 33487** 

. . .

Tax filing requirement and elects to do so.

(See criteria on back)

3200 N FED HWY STE 206-18

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

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STREET ADDRESS

STREET ADDRESS

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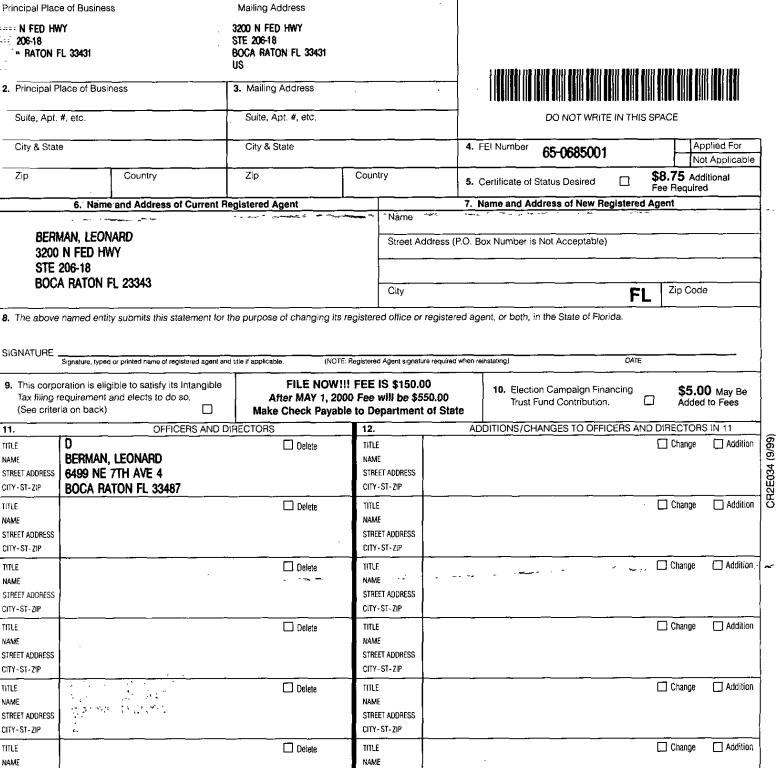
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## FILED May 03, 2000 8:00 am Secretary of State

05-03-2000 90066 026 \*\*\*150.00



13. I hereby certify that the information supplied with this filling 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 regeiver 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 a horizontal other like empowered. changed, or on an attach ent with an address, with

CITY-ST-ZIP

Name

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

NAME

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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR