2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P96000068577 **DOCUMENT #**

1. Entity Name

FRIEDFELD AND ASSOCIATES, P.A.



T1LED Mar 17, 2003 8:00 am Secretary of State 203-17-2003 90719 045 2007

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### Street Address (P.O. Box Number is Not Acceptable) #### Street Address (P.O. Box Number is Not Acceptable) #### Street Address (P.O. Box Number is Not Acceptable) City			, ·			Name			-	_	
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Signature, proper or printed range of agreed agreed agreed and as 58 stappicable (NOTE: Repatition of Agriculture reported agreed a	8. The above the obligation	named entity tions of regis	y submits this statement for ered agent.	the purpose of	changing its reg	gistered office or	registered	d agent, or both, in the State	of Florida. I ar	n familiar with,	and accept
Atter May 1, 2003 Fee will be \$550.00 May Be Make Check Payable to Florida Department of State 10.	SIGNATURE		or printed name of registered agent a	and title if applicable.	(NOTE: Re	egistered Agent signatur	e required w	hen reinstating)	3 14	103	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME FRIEDFELD, ERIC 2665 S BAYSHORE DR, SUITE 400 COCONUT GROVE FL TITLE NAME STREET ADDRESS CITY-ST-ZIP	Afte	3 Fee will be \$550.00			· ·	~ ~					
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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

SIGNATURE: