

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90154 001 ***600.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P96000090617**

1. Fictitious Name

LAW OFFICES OF KEITH A. MARTIN PA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2331 N. STATE RD 7
Sole, Apt. #, etc.
222
City & State
LAUDERHILL FLORIDA
City & State
3331-3 Country
USA Zip
3332 Country
USA

3. Mailing Address
8642 BRIDLE PATH CT
Sole, Apt. #, etc.
DAVIE FLORIDA
City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0706299
Applied for
Not Applied for

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
KEITH A. MARTIN
Street Address (If O. Box Number is Not Acceptable)
8642 BRIDLE PATH COURT
City
DAVIE FL Zip Code
33320

8. The above named entity submit this document for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE _____

9. This corporation certifies its liability to filing for
tax filing requirements and orders to do so.
(See instructions on back) ☐
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

NAME
PRES., SEC, TREAS
STREET ADDRESS
KEITH A. MARTIN
CITY, ST, ZIP
8642 BRIDLE PATH CT
DAVIE FL 33328

TITLE
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CITY, ST, ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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 recorder of its records, or authorized to execute this report as required by Chapter 907, Florida Statutes, and that my name appears in Book 17 of or an amendment with a checkmark or other notation as required.

SIGNATURE: **Keith A. Martin** **4/30/02** **954-730-8983**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRF004P (12-01)