

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90154 027 \*\*\*150.00

**DOCUMENT # P96000093335**

1. Entity Name

**PFEFFER CONSULTING GROUP, INC.**

Principal Place of Business

**1522 SAN IGNACIO, STE. 2  
 CORAL GABLES FL 33146**

Mailing Address

**1111 CRANDON BLVD, Suite B-103  
 KEY BISCAVNE FL 33149**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**1111 Crandon Blvd.**

Suite/Apt. #, etc.

**B-103**

3. Mailing Address

Suite, Apt. #, etc.

**B-103**

City & State

**Key Biscayne FL**

City & State

Zip

**33149**

Country

**Miami Dade**

4. FEI Number

**65-0708631**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**PFEFFER, WENDELL G**

**1522 SAN IGNACIO, STE. 2  
 CORAL GABLES FL 33146**

7. Name and Address of New Registered Agent

Name **Pfeffer, Wendell G**

Street Address (P.O. Box Number is Not Acceptable)

**1111 Crandon Blvd # B-103**

City

**Key Biscayne**

**FL**

Zip Code

**33149**

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

**Wendell G. Pfeffer, President 4.15.02**

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 \$150.00  
 After May 1, 2002 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

TITLE **P**  
 NAME **PFEFFER, WENDELL G**  
 STREET ADDRESS **1522 SAN IGNACIO AVE., STE. 2**  
 CITY-ST-ZIP **1111 Crandon Blvd Key Biscayne FL 33149**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
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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)(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:

**Wendell G. Pfeffer, President**

**4.15.02 305-669-7995**

Date

Daytime Phone #

CR2E034 (9/01)