

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 08, 2002 8:00 am
Secretary of State

07-08-2002 90249 001 ***150.00
 07-08-2002 90249 002 *****8.75

DOCUMENT # P96000102862

1. Entity Name
PHILIP MEDVIN, PROFESSIONAL ASSOCIATION

Principal Place of Business
 2801 PONCE DE LEON BLVD. SUITE 370
 CORAL GABLES FL 33134

Mailing Address
 2801 PONCE DE LEON BLVD. SUITE 370
 CORAL GABLES FL 33134

2. Principal Place of Business
Same as above

3. Mailing Address
Same as above.

Suite, Apt. #, etc.

City & State

Zip **Country** **City & State** **Zip** **Country**

Miami-Dade *Miami-Dade*

6. Name and Address of Current Registered Agent

MEDVIN, PHILLIP
 2801 PONCE DE LEON BLVD, SUITE 370
 CORAL GABLES FL 33134

4. FEI Number **59-0592191**

Applied For
☐ **Not Applicable**

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

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ **DATE** _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2002 Fee 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MEDVIN, PHILIP 2801 PONCE DE LEON BLVD, SUITE 370 CORAL GABLES FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Philip Medvin* **7/3/02** **305-448-3302**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

PHILIP MEDVIN
ATTORNEY AT LAW
SUITE 370
2801 PONCE DE LEON BOULEVARD
CORAL GABLES, FLORIDA 33134

TELEPHONE (305) 448-3302
FACSIMILE (305) 448-1750

Attachment 96731
P96000102862

July 3, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Philip Medvin, Professional Association
Doc. No.: P96000102862

Dear Sirs:

I wish to advise you that I did not receive the 2002 Uniform Business Report in January of 2002 from your office. The late file Notice was received by me a few days ago and was the first indication the Report was not filed and the filing fee not paid.

This letter is sent on advice today from your office.

Enclosed please find the referenced 2002 UBR and my check for \$150.00 in payment of the 2002 filing fee. By return mail please mail me confirmation of this filing. My check for \$8.75 also enclosed for a certificate of status.

Thanking you, I am,

Yours truly,

Philip Medvin
PHILIP MEDVIN

PM:gh
Encl. as noted