2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P97000002412 **DOCUMENT #**

1. Entity Name

FREDRIK S. LIPPMAN, C.P.A., P.A.



FILED Mar 19, 2003 8:00 am Secretary of State

03-19-2003 90177 006 ***150.00

						CONT	TRES							
Principal Plac 3325 HOLLYW HOLLYWOOD	OOD BLVD.	s	Mailing Address 3325 HOLLYWOOD BLVD. HOLLYWOOD FL 33021				·							
2. Principal P	Place of Busin	ness	3. Mailing Address											
Suite, Apt. #, etc.			Suite Apt 4 etc					☐ CHECK HERE IF MAKING CHANGES						
City & State			City & State				4.	4. FEI Number 65-0729403					Applied For Not Applicable	3
Zip	Country		Zip		Country		5.	Certificate o	f Status [Desired		\$8.75 A		
6. Name and Address of Current Registered Agent							7.	Name and A	ddress	of New R	egistered	Agent		
						Name								1
LIPPMAN, FREDRIK S 3325 HOLLYWOOD BLVD.						Street Address (P.O. Box Number is Not Acceptable)								
HOLLYWOOD FL 33021														1
HOLETWOOD TE GOOE								- Vountebre	***		FI	Zip Co	de	
	named entiti ions of regis	y submits this statement fo tered agent.	r the purp	ose of changing its r	egister	ed office or	registered ag	gent, or both.	, in the St	ate of Flo	rida. Lam	familiar with	n, and accept	
SIGNATURE.	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE:	Registere	ed Agent signatu	re required when r	einstating)			DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of S										paign Fin ontribution	-		00 May Be ed to Fees	1
10.		OFFICERS AND		l IRS	11.		ΔΓ	.I DDITIONS/C	HANGES	TO OFF	ICERS AN	D DIRECTO	RS IN 11	-
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NAME		FREDRIK S		_ 55.50	NAM	te								3
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NAME STREET ADDRESS					NAM	EET ADDRESS				-		,		}
CITY-ST-ZIP						-ST-ZIP						•		}

12. Thereby 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 Thereby Certify that the information supplied with this filling does not quality for the exemption stated in Section 119.073(t), Fiding Stateds. Fidure 1 certify that the information supplied in this report or supplied 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 frustee employered 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 like empowered.

GNATURE:

GNATURE:

SIGNATURE: