

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90020 035 ***550.00

DOCUMENT # P97000029397

1. Entity Name

THE ROSE & THE NIGHTINGALE, INC.



Principal Place of Business

**4425 NW 65 AVE
 LAUDERHILL FL 33319**

Mailing Address

**4425 NW 65 AVE
 LAUDERHILL FL 33319**

2. Principal Place of Business

SAME AS ABOVE

3. Mailing Address

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0742952

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SCHULMAN, ROBERT E
 4425 NW 65 AVE
 LAUDERHILL FL 33319**

7. Name and Address of New Registered Agent

Name

UNCHANGED

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

SEPT 11, 2000

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

A

**FILE NOW!!! FEE IS \$550.00
 After SEPTEMBER 13, 2000 Min. 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 ☐ Delete

**PD
 SCHULMAN, YEHUDIT
 4425 NW 65 AVE
 LAUDERHILL FL 33319**

TITLE ☐ Delete

**DV
 SCHULMAN, ROBERT
 4425 NW 65 AVE
 LAUDERHILL FL 33319**

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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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:

SIGNATURE REQUIRED Vice President

SEPT 11, 2000 954-578 8220

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)