

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91384 019 ***150.00

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DOCUMENT # P97000030564

1. Entity Name
MARK A. COEL, P.A.



Principal Place of Business
**2700 SOUTH COMMERCE PKWY
SUITE 305
WESTON FL 33331
US**

Mailing Address
**2700 SOUTH COMMERCE PKWY
SUITE 305
WESTON FL 33331
US**



2. Principal Place of Business
33 S.E. 8th Street

Suite, Apt. #, etc.
Suite 400

City & State
Boca Raton, FL

Zip
33432

Country
USA

3. Mailing Address

33 S.E. 8th Street

Suite, Apt. #, etc.
Suite 400

City & State
Boca Raton, FL

Zip
33432

Country
USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-0743586

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**COEL, MARK A.
2700 SOUTH COMMERCE PARKWAY
SUITE 305
WESTON FL 33331-0000**

7. Name and Address of New Registered Agent

Name
Coel, Mark A.
Street Address (P.O. Box Number is Not Acceptable)
33 S.E. 8th Street
Suite #400
City
Boca Raton **FL** Zip Code
33432

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 **Mark A. Coel, Esq.**

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

(NOTE: Registered Agent signature required when reinstating)

4/23/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
COEL, MARK
2700 SOUTH COMMERCE PKWY # 305
WESTON FL 33331** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
Coel, Mark
33 S.E. 8th Street, #400
Boca Raton, FL 33432** ☒ Change ☐ Addition

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

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

TITLE
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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Mark A. Coel, Esq.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/03 561-392-0540
Date Daytime Phone #

CR2E034 (10/02)