

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90065 020 ***150.00

DOCUMENT # P97000035674

1. Entity Name
MALCOLM A. PUROW, P.A.



Principal Place of Business
**100 W CYPRESS CREEK RD
STE 930
FORT LAUDERDALE FL 33309**

Mailing Address
**100 W CYPRESS CREEK RD
STE 930
FORT LAUDERDALE FL 33309**

2. Principal Place of Business
**2800 Weston Road
Suite, Apt. #, etc.
Suite 201**

3. Mailing Address
**2800 Weston Road
Suite, Apt. #, etc.
Ste 201**

City & State
Weston, FL

City & State
Weston, FL

Zip Country
33331 USA

Zip Country
33331 USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0746492**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**PUROW, MALCOLM A
100 W CYPRESS CREEK RD
STE 930
FORT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name **Purow, Malcolm A.**
Street Address (P.O. Box Number is Not Acceptable)
**2800 Weston Road
Ste. 201
City Weston FL Zip Code 33331**

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

(NOTE: Registered Agent signature required when reinstating)

3/30/03
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 **D** ☐ Delete
NAME **PUROW, MALCOLM A**
STREET ADDRESS **100 W CYPRESS RD STE 930**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **Purow, Malcolm A.**
STREET ADDRESS **2800 Weston Road, ste 201**
CITY-ST-ZIP **Weston, FL 33331**

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/03
Date

954-493-9330
Daytime Phone #

0336632 AV

CR2E034 (10/02)