

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000036468

FILED  
Jan 28, 2002 8:00 AM  
Secretary of State

**Entity Name:** MEDICAL CONSULTANTS FOR THE LEGAL PROFESSION, INC.

## Current Principal Place of Business:

1380 NE MIAMI GARDENS DRIVE  
225  
MIAMI, FL 33179

## New Principal Place of Business:

1380 NE MIAMI GARDENS DRIVE  
251  
MIAMI, FL 33179

## Current Mailing Address:

1380 NE MIAMI GARDENS DRIVE  
225  
MIAMI, FL 33179

## New Mailing Address:

1380 NE MIAMI GARDENS DRIVE  
251  
MIAMI, FL 33179

FEI Number: 65-0749987

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAZAL, DENNIS A  
1380 NE MIAMI GARDENS DRIVE  
#225  
MIAMI, FL 33179 US

## Name and Address of New Registered Agent:

MAZAL, DENNIS A  
1380 NE MIAMI GARDENS DRIVE  
#251  
MIAMI, FL 33179 US

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:

01/28/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MAZAL, DENNIS A  
Address: 1381 NE MIAMI GARDENS DR  
City-St-Zip: N MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MAZAL, DENNIS A  
Address: 1380 NE MIAMI GARDENS DR  
City-St-Zip: N MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS A. MAZAL

DR.

01/28/2002

Electronic Signature of Signing Officer or Director

Date