

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000074022

1. Entity Name

MURPHY'S LAW FORT LAUDERDALE, INC.

FILED

Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90183 035 ***150.00

Principal Place of Business

300 SW 1ST AVENUE
UNIT 145
FT LAUDERDALE FL 33301

Mailing Address

300 SW 1ST AVENUE
UNIT 145
FT LAUDERDALE FL 33301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0845672

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TERMINELLO, LOUIS J ESQ.
CHADROFF, TERMINELLO & TERMINELLO
2700 SW 37TH AVENUE
MIAMI FL 33133

Name

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

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME SINCLAIR, LESLIE ☐ Delete
STREET ADDRESS 2977 MCFARLANE ROAD
CITY-ST-ZIP MIAMI FL 33133
Address Change

TITLE SINCLAIR, LESLIE ☒ Change ☐ Addition
NAME 19801 E. COUNTRY CLUB DR
STREET ADDRESS MIAMI, FL 33180 #208
CITY-ST-ZIP

TITLE VSTD
NAME MALAUGH, CAROLINE ☐ Delete
STREET ADDRESS 19655 EAST COUNTRY CLUB DRIVE #502
CITY-ST-ZIP AVENTURA FL 33180

TITLE MALAUGH, CAROLINE ☐ Change ☐ Addition
NAME 19801 E. COUNTRY CLUB DR
STREET ADDRESS MIAMI, FL 33180 #208
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. MALAUGH 1/18/01 3059310174
Date Daytime Phone #

CR2E034 (10/00)