

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 17, 2002 8:00 am**  
**Secretary of State**

07-17-2002 90125 049 \*\*\*150.00

**DOCUMENT # P97000080601**

1. Entity Name

ANDREW H. ZWICK, M.D., P.A. ✓

Principal Place of Business

5458 TOWN CENTER ROAD, SUITE 2  
 BOCA RATON FL 33486

Mailing Address

5458 TOWN CENTER ROAD, SUITE 2  
 BOCA RATON FL 33486

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

change to "Suite 19"

Suite, Apt. #, etc.

change to "Suite 19"

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0783370

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

ZWICK, APRIL M ESQ.  
 2801 UNIVERSITY DRIVE  
 SUITE 203  
 CORAL SPRINGS FL 33065

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. 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)

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 \$550.00**  
**After September 13, 2002 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	ZWICK, ANDREW H M.D.	
STREET ADDRESS	5458 TOWN CENTER ROAD, SUITE 2	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		suite 19
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (4/02)

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**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew H. Zwick MD 7/10/02 561-395-2424

*Attachment 121601*  
**Professional Trust Accounting, Inc.**

7015 Beracasa Way, Suite 201

Boca Raton, FL 33433-3453

PH: (561) 750-4001

FAX: (561) 750-0708

July 10, 2002

Florida Department of State  
Uniforms Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re:

P97000080601

Andrew H. Zwick, M.D., P.A.

Dear Sirs:

My client, Dr. Zwick, called me today about a notice he received from the Department of State.

I went to the office and realized this was a second notice (before dissolution) for the corporation.

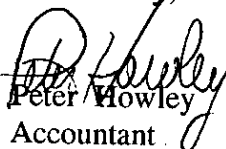
A review of the past several years shows that payment of the annual fee always occurred in either January or February each year. After discussing this with Dr. Zwick, I realized that Dr. Zwick moved his offices in January of 2002.

In the move, various files and records were both lost and misplaced. The Uniform Business Report must have been lost in the move.

Please accept the enclosed check of \$150, along with the signed 2002 Uniform Business Report and waive the penalty for cause.

Thank you for your understanding in this matter.

Yours truly,

  
Peter Howley  
Accountant

**Professionals** who's goal is to help you with: **FIRPTA** filings;  
**Trust**, estate and individual tax return preparation; as well as  
**Accounting** for estates, trusts and businesses.