

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2002 8:00 am
Secretary of State

07-24-2002 90134 022 ***150.00

DOCUMENT # P97000084982

1. Entity Name
BERNARD STERNBERG, P.A.



80131900



DO NOT WRITE IN THIS SPACE

Principal Place of Business 9893 N. GRAND DUKE CIRCLE TAMARAC FL 33321	Mailing Address 9893 N. GRAND DUKE CIRCLE TAMARAC FL 33321
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 65-0784203	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STERNBERG, BERNARD
9893 N. GRAND DUKE CIRCUS
TAMARAC FL 33321

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP STERNBERG, BERNARD 9893 N. GRAND DUKE CIRCLE TAMARAC FL 33321 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **7/18/02 954-727-5929**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment
B0131900

BERNARD STERNBERG, P.A.
ATTORNEY AT LAW
8333 WEST McNAB ROAD
SUITE 227
TAMARAC, FLORIDA 33321
(954)741-6200

Facsimile-954-726-7307

July 17, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Uniform Business Report-Document # P97000084982

Dear Sirs:

I respectfully request that you accept my Business Report, which is filed late, and waive the additional fees, for the following reasons:

- 1) I am seventy-one years old. Last year I had a major heart attack, and later in the year I sustained a similar episode. My work schedule is now limited.
- 2) When I had received the original form in January, I attempted to file on line, using my home computer, and pay the required fee using my charge card. Apparently I was not successful in that attempt.

For the foregoing reasons, I respectfully request you accept the late filing, and my check in the sum of \$150.00 enclosed herewith.

Yours truly,



Bernard Sternberg, Attorney