

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 26, 2001 8:00 am**  
**Secretary of State**

04-26-2001 90117 022 \*\*\*150.00

C0053028

DO NOT WRITE IN THIS SPACE

<b>DOCUMENT #</b> <i>198000000721</i>			
<b>1. Entity Name</b> <div style="text-align: center; font-size: 1.2em; margin-top: 10px;"><i>DR. MARAH J. LEE, P.A.</i></div>			
<b>Principal Place of Business</b> <i>2001 E. COMMERCIAL BLVD</i> <i># 301</i> <i>FT LAUDERDALE, FL 33308</i>		<b>Mailing Address</b> <i>2001 E. COMMERCIAL BLVD</i> <i># 301</i> <i>FT LAUDERDALE, FL 33308</i>	
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
<b>4. FEI Number</b> <i>65-0898825</i>		Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> <div style="margin-top: 10px;"><i>LEE, MARAH DR</i> <i>2001 E. COMMERCIAL BLVD</i> <i># 301</i> <i>FT LAUDERDALE, FL 33308</i></div>		<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code	
<b>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.</b>  SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
<b>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.</b> <input type="checkbox"/> <small>(See criteria on back)</small>		<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	
<b>10. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>11. OFFICERS AND DIRECTORS</b>		<b>12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP <div style="margin-top: 10px;"><i>P</i> <i>LEE, MARAH DR</i> <i>2001 E. COMMERCIAL BLVD-301</i> <i>FT. LAUDERDALE FL 33308</i></div>	<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

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)