

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000001979

1. Entity Name
STEPHEN J. ALLOCCO, P.A.

FILED
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90042 020 ***150.00

Principal Place of Business

1975 E. SUNRISE BLVD., 5TH FLOOR
FT. LAUDERDALE FL 33304-1454

Mailing Address

1975 E. SUNRISE BLVD., 5TH FLOOR
FT. LAUDERDALE FL 33304-1454

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

STE. 711

Suite, Apt. #, etc.

STE. 711

City & State

City & State

4. FEI Number 65-0821723

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

ALLOCCO, STEPHEN J
1975 E. SUNRISE BLVD., 5TH FLOOR
FT. LAUDERDALE FL 33304-1454

Name

Street Address (P.O. Box Number is Not Acceptable)

STE. 711

City

FL

Zip Code

33304

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 ☐ Delete
NAME ALLOCCO, STEPHEN J ESQ
STREET ADDRESS 1975 E. SUNRISE BLVD., 5TH FLOOR
CITY-ST-ZIP FT. LAUDERDALE FL 33304-1454

TITLE PD ☒ Change ☐ Addition
NAME STEPHEN J. ALLOCCO, ESQ.
STREET ADDRESS 1975 E. SUNRISE BLVD., STE. 711
CITY-ST-ZIP FT. LAUDERDALE FL 33304

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VICE PRESIDENT ☐ Change ☒ Addition
NAME CRAIG PACKER, ESQ.
STREET ADDRESS 1975 E. SUNRISE BLVD., STE. 711
CITY-ST-ZIP FT. LAUDERDALE, FL 33304

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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

Date

Daytime Phone #

CR2E034 (10/00)