

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2003 8:00 am
Secretary of State

08-13-2003 90074 020 ***150.00

DOCUMENT # P98000004362

1. Entity Name
ROBERT R. EDWARDS, P.A.



Principal Place of Business
5220 N.E. 26TH AVENUE
FT. LAUDERDALE FL 33308

Mailing Address
5220 N.E. 26TH AVENUE
FT. LAUDERDALE FL 33308

2. Principal Place of Business
5255 North Federal Highway

3. Mailing Address
5255 North Federal Highway

Suite, Apt. #, etc.
FLOOR 3

Suite, Apt. #, etc.
FLOOR 3

City & State
Boca Raton FL

City & State
Boca Raton FL

Zip **33487** **Country** **USA**

Zip **33487** **Country** **USA**

4. FEI Number **65-0808040**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

EDWARDS, ROBERT R
5220 N.E. 26TH AVENUE
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

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]*
Signature, typed or printed name of registered agent and title if applicable

ROBERT R. EDWARDS, PSTD
(NOTE: Registered Agent signature required when reinstating)

7/14/03
DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD EDWARDS, ROBERT R 5220 N.E. 26TH AVENUE FT. LAUDERDALE FL 33308	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE REQUIRED

7/14/03

5101-241-9254

CR2E034 (4/03)

Attachment

80138130

#P98000004362

Law Office of
ROBERT R. EDWARDS, P.A.
Regent Bank Building
Third Floor
5255 N. Federal Highway
Boca Raton, Florida 33487
Tel. (561) 241-9254 * Fax. (561) 994-8021

July 15, 2003

VIA U.S. MAIL

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

To Whom It May Concern:

I, Robert R. Edwards, hereby state the attached 2003 for Profit Corporation Uniform Business Report (UBR) is the first notice received by my law firm, Robert R. Edwards, P.A. Please be so kind as to waive the late fee and accept the enclosed check for the original filing fee of \$150.00.

Thank you,



Robert R. Edwards, Esq.
as PSTD of Robert R. Edwards, P.A.
FEI Number 65-0808040