

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000046529

1. Entity Name

MARC A. LURIE O.D., P.A.

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90005 002 ***150.00

Principal Place of Business

8259 W SUNRISE BLVD
 PLANTATION FL 33322

Mailing Address

8259 W SUNRISE BLVD
 PLANTATION FL 33322

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0841848

Applied For

Not Applicable

Zip

Country

Zip

Country

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

LEVITT, PRESTON C ESQ.
 8211 W BROWARD BLVD, PENTHOUSE 4
 PLANTATION FL 33324

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.

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, 2000 Min. 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PTSD
 LURIE, MARC A
 8259 W SUNRISE BLVD
 PLANTATION FL 33322 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Change ☐ Addition

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 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Change ☐ Addition

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 I'm empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

08/09/2000

attachment

Doc#H: pg 8000046529
00078867

081400

MARC A. LURIE, O.D., P.A.
Optometrist

Dear Florida Dept of State.

I incorporated last year and just got this 2000
midterm business report. The front page said "Second
Notice"; however, I never received a first notice. I called
my accountant and he said the fee for corporations
if filed timely is \$150.⁰⁰ I am enclosing a check for \$150⁰⁰
and hope you'll accept this because of the fact that
I never got a 1st notice; otherwise I would have sent
you \$150⁰⁰ at that time. I hope that you'll accept
this and credit my account in full.

Thanks so much.

Marc Lurie O.D.