

# 2000 UNIFORM BUSINESS REPORT (UBR)

4/2:

FILED

Jun 05, 2000 8:00 am  
Secretary of State

04-22-2000 90028 009 \*\*\*158.75

DOCUMENT # P98000096084

1. Entity Name:

LAW OFFICES OF MARTYN VERSTER, P.A.

Principal Place of Business

10691 NORTH KENDALL DRIVE  
SUITE 205  
MIAMI FL 33176

Mailing Address

10691 NORTH KENDALL DRIVE  
SUITE 205  
MIAMI FL 33176-1551

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FEI Number.

65-9992385

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

VERSTER, MARTYN W.D.  
10691 NORTH KENDALL DRIVE  
SUITE 205  
MIAMI FL 33176

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 \$150.00  
After MAY 1, 2000 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

TITLE: D Vice President  
NAME: VERSTER, MARTYN W.D.  
STREET ADDRESS: 10691 NORTH KENDALL DRIVE, SUITE 205  
CITY-ST-ZIP: MIAMI FL 33176

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

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CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete  
NAME: ☐ Delete  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☒ Addition  
NAME: LISA A. BAIRD  
STREET ADDRESS: 10691 North Kendall Drive  
CITY-ST-ZIP: Suite 205, Miami, Florida 33176

TITLE: ☒ Change ☐ Addition  
NAME: President  
STREET ADDRESS: ☐ Delete  
CITY-ST-ZIP: ☐ Delete

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-12-00

CR2E034 (9/99)

#P98000096084

305072

## MARTYN W.D. VERSTER, P.A.

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MARTYN W.D. VERSTER, ESQ.  
Admitted in FL and VA

ALINA B. BOSQUE  
Legal Assistant

10691 North Kendall Drive  
Suite 205  
Miami, Florida 33176  
Tel.: (305) 279-2713  
Fax: (305) 279-5135

May 23, 2000

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

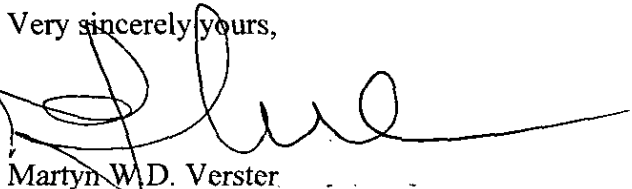
Re: Baird & Verster, P.A.  
Reference number: P98000096084

Dear Sirs:

Enclosed herewith please find the corrected annual report. The following are the titles of the officers:

Lisa A. Baird:	President
Martyn Verster:	Vice President

Very sincerely yours,



Martyn W.D. Verster

MWDV/abb