

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000098614

1. Entity Name

HURWITZ KROLL & PARTNERS, INC.

FILED

00 SEP 25 PM 2:41

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

Principal Place of Business

8390 N.W. 53RD STREET
MIAMI FL 33166

Mailing Address

8390 N.W. 53RD STREET
MIAMI FL 33166

2. Principal Place of Business

8240 NW 52 Terrace

3. Mailing Address

8240 NW 52 Terrace

Suite, Apt. #, etc.

102

Suite, Apt. #, etc.

102

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0877158

Applied For

Not Applicable

Zip

33166

Country

USA

Zip

33166

Country

USA

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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.

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

TITLE **D** Delete
NAME **HURWITZ, NORMAN J**
STREET ADDRESS **8390 N.W. 53RD STREET**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **D** Delete
NAME **KROLL, JOHN C**
STREET ADDRESS **8390 N.W. 53RD STREET**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
NAME
STREET ADDRESS **8240 NW 52 Terrace, Suite 102**
CITY-ST-ZIP **Miami, FL 33166**

TITLE Change Addition
NAME
STREET ADDRESS **8240 NW 52 Terrace, Suite 102**
CITY-ST-ZIP **Miami, FL 33166**

TITLE Change Addition
NAME **500003415995--9**
STREET ADDRESS **-10/05/00--01124--019**
CITY-ST-ZIP *******550.00 *****550.00**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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: **NORMAN J. HURWITZ - PRES**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-2000 **305-470-0073**
Date Daytime Phone #

KE

CR2E034 (5/00)