

2002 UNIFORM BUSINESS REPORT (UBR)

Page 1 of 2

0043311 AV

DOCUMENT # P98000102178

1. Entity Name
PHARMA RESEARCH GROUP, INC.

FILED

02 JUL 23 PM 12: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
4302 ALTON ROAD
SUITE 850
MIAMI BEACH FL 33140

Mailing Address
4302 ALTON ROAD
SUITE 850
MIAMI BEACH FL 33140

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 65-0959098
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BASSAN, ISAAC
4302 ALTON ROAD, STE. 850
MIAMI BEACH FL 33140

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 _____ (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, 2002 Fee 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 NAME STREET ADDRESS CITY-ST-ZIP	PD BASSAN, ISAAC 4302 ALTON ROAD, SUITE 850 MIAMI BEACH FL 33140	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLOOM, MICHAEL 4302 ALTON ROAD, SUITE 850 MIAMI BEACH FL 33140	<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

12. 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	500006851105-9 -08/01/02--01037--009 ****150.00 ****150.00	<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

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/02

CR2E034 (4/02)

Pharma Research Group, Inc.

4302 Alton Road Suite 850

Miami Beach, Florida 33140

(305) 532-2228

Attachments

Myerson

Isaac Bassan, M. D.

Michael L. Bloom, M. D.

July 16, 2002

Uniform Business Report

Division of Corporations

P.O. Box 1500

Tallahassee, FL 32302-1500

RE: Document # P9800102178

FEI # 65-0959098

To whom it may concern,

I would like to apologize for sending this payment in late. To my knowledge, I received this statement for the first time in July. We are going through some changes and the original statement may have not reached me. If you check your records, we had a previous address of 7000 S.W. 62nd Ave. Suite PH-S, South Miami, FL 33143

I would greatly appreciate it if you could reconsider accepting the filing fee of \$150.

Sincerely,



Isaac Bassan, M.D.

President