

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003 8:00 am
Secretary of State

05-06-2003 90046 010 ***150.00

DOCUMENT # P99000001159

1. Entity Name
SARA ALIJEWICZ, ESQ. P.A.



Principal Place of Business
**6801L.W RD
336
LAKE WORTH, FL 33467**

Mailing Address
**6801L.W RD
336
LAKE WORTH, FL 33467**

2. Principal Place of Business
**6801 Lake Worth Rd
Suite, Apt. #, etc.
Ste 336**

3. Mailing Address
Same
Suite, Apt. #, etc.

City & State
LAKE WORTH, FL 33467
Zip
33467 Country
USA

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-0887877

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ALIJEWICZ, SARA
14105 TECOMA DRIVE
WEST PALM BEACH, FL 33414**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
ALIJEWICZ, SARA
14105 TECOMA DRIVE
WELLINGTON, FL 33414** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SARA ALIJEWICZ 5/2/3 (561) 149-2204

Daytime Phone #

CP2E034 (10/02)

Attachment # 80114496
Lively & Alijewicz, L.L.C. P99000001189

Lively & Alijewicz, L.L.C.
6801 LAKE WORTH, RD
Suite 336
LAKE WORTH, FL 33467
Phone: (561)649-2204
Fax: (561)649-8335

May 2, 2003

Division of Corporation
409 E. Gaines Street
Tallahassee, FL 32399

Re: UBR Sara Alijewicz, Esq. PA

To Whom it may concern:

Enclosed please find the UBR and fee for this Corporation. There are four entities operating from this business address, and our manager did not realized that we had not received a UBR for this entity. The other three entities are The Family Law Clinic, Lively & Alijewicz, LLC, and Cathy L. Purvis Lively, Esq. P.A. You will note that all of those reports were send in prior to the deadline. Today, when I performed billing, I noted that this report had not been received or paid.

Sincerely,



Sara Alijewicz
Attorney