

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900005 1112

1. Entity Name

PHG Consulting Inc.

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90164 001 ***158.75

A0051200

DO NOT WRITE IN THIS SPACE

Principal Place of Business
2665 S. Bayshore Dr.
Ste 202
Coconut Grove, FL 33133

Mailing Address
2665 S. Bayshore Dr.
Ste 202
Coconut Grove, FL 33133

2. Principal Place of Business
9400 S Dadeland Blvd.

3. Mailing Address
9400 S Dadeland Blvd

Suite, Apt. #, etc.

Ste 100

City & State

Miami, FL

Zip

33156

Country

Suite, Apt. #, etc.

Ste 100

City & State

Miami, FL

Zip

33156

Country

4. FEI Number

65-0948918

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

Wohl, Michael D
9400 S Dadeland Blvd. Ste 100
Miami, FL 33156

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.

Michael D. Wohl President

DATE

4/11/01

(NOTE: Registered Agent signature required when reinstating)

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

2. Any change of office or agent will require a new filing.

3. Filing is not payable in 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
P
Wohl, Michael D
9400 S. Dadeland Blvd. Ste 100
Miami, FL 33156

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
C
Wolfson Louis III
9400 S Dadeland Blvd. Ste 100
Miami, FL 33156

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVP
Deutch, David D.
9400 S. Dadeland Blvd Ste 100
Miami, FL 33156

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SVP
Friedman, Mitchell M
9400 S. Dadeland Blvd Ste 100
Miami, FL 33156

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael D. Wohl 4/11/01 (305) 854-7100

Date

Daytime Phone #

CR2E034 (11/00)