

2000 UNIFORM BUSINESS REPORT (UBR)

7/10/00-90016-039-\$150.00-\$150.00

92193

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
00067233

DOCUMENT # **999 0000 51489**

1. Entity Name
DIANA FISCHER, M.D., P.A.

Principal Place of Business
**6801 LAKE WORTH ROAD
SUITE 332
LAKE WORTH, FL 33467**

Mailing Address
**6801 LAKE WORTH ROAD
SUITE 332
LAKE WORTH, FL 33467**

2. Principal Place of Business
6801 LAKE WORTH RD

3. Mailing Address
6801 LAKE WORTH ROAD

Suite, Apt. #, etc.
332

Suite, Apt. #, etc.
332

City & State
LAKE WORTH, FLORIDA

City & State
LAKE WORTH, FLORIDA

Zip
33467

Country
USA

Zip
33467

Country
USA

4. FEI Number
65-0926612

Applied For
☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
**SPIEGGL AND UTERRA, P.A.
343 ALBEMAR AVENUE
CORAL GABLES, FL 33134
REGISTRATION # 54675**

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]**

Signature, typed or printed name of registered agent or new agent in replacement (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 PRESIDENT	☐ Delete
NAME DIANA FISCHER, M.D.	
STREET ADDRESS 6801 LAKE WORTH ROAD SUITE 332	
CITY-ST-ZIP LAKE WORTH, FL 33467	
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	
CITY-ST-ZIP	
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: **DIANA FISCHER, M.D., P.A.** **6/20/2000** **(561) 648-1414**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)



Diana Fischer, M.D.
Psychiatrist
Child • Adolescent • Adult

Attachment
D# 999000051489
D# 67233

Pg 293

MAY 23, 2000

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
RE - 2000 UNIFORM BUSINESS REPORT

TO WHOM IT MAY CONCERN,

I am the office manager for Dr. Diana Fischer who early in 1999 became incorporated, the entity name known as DIANA FISCHER, M.D., P.A.

When I received the submitted form I had no awareness of the need for timely submission and I just kept in a pile of other papers.

In the future, I will be more careful and observant + will endeavor to keep on top of things, especially if this importance. I, therefore, beg your indulgence since this is less than 1 full year of incorporation and my employment as office manager.

A check for \$150.00 is hereby submitted and we await your reply.

Sincerely yours

This will also be signed by Dr. Fischer, who has read this letter.

Ram James
Diana Upair MD

Pg 3 of 3

P990000651489

9/13/00

To whom it may concern,

I apologize for the delay in returning the Business report (attached).

THE Reason for the lateness is due to the misinformation that was provided by the attached cover letter that was sent by your office.

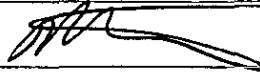
As we do NOT have an FEI number only a TAX number.

Through numerous telephone calls to your office and to the Internal Revenue service it was finally established that the regular TAX number is what I should be supplying to you in box number four where you ask for a FEI number.

THANK you for your understanding and your cooperation,

Sincerely,

Ron HOCNSTADT - Assistant Office MGR



DIANA FISCHER, M.D.