## 2000 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P99000051761 May 18, 2000 8:00 am Secretary of State WOLPERT & KAUFMAN FINANCIAL SERVICES, INC. 05-18-2000 90318 037 \*\*\*150.00 Principal Place of Business Mailing Address 9200 SOUTH DADELAND BLVD. 9200 SOUTH DADELAND BLVD. SUITE 614 SHITE 614 MIAMI FL 33156-2714 **MIAMI FL 33156** 2. Principal Place of Business Mailing Address 9100 S. DADELAND BLVD. 9100 J. DADELAND BLVD. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 550 4. FEI Number Applied For City & State City & State 65-0926282 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired <u>U. S. A</u> u.s.a. 7. Name and Address of New Registered Agent Name and Address of Current Registered Agen KAUFMAN, JERRY R Address (P.O. Box Number is Not Acceptable) KAUFMAN, JERRY R J. DADELAND BLVD 9200 SOUTH DADELAND BLVD. **SUITE 614** suite 1550 **MIAMI FL 33156** 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 (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so: Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE P/D ☐ Delete TITLE KAUFMAN, JERRY R NAME NAME STREET ADDRESS 9100 S. DADELAND BLVD., SUITE 1550 9200 SOUTH DADELAND BLVD. STREET ADDRESS MIAMI, FL 33156-7816 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 ☐ Addition TITLE ☐ Delete TITLE WOLPERT, ANTHONY H NAME NAME 9100 S. DADELAND BLVD. I SUITE KSO MIAMI, FL 33156-7818 STREET ADDRESS 9200 SOUTH DADELAND BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Delete

TITLE NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-7IP

JERRY R. KAUFMAN 4/75/00 (305)670-177

Change

Change

Addition

☐ Addition