2002 UNIFORM BUSINESS REPORT (UBR)

2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P99000053006 1. Entity Name BASSO, GROSS & FRIED, P.A.							FILED Feb 04, 2002 8:00 am Secretary of State 02-04-2002 90135 013 ***150.00			
Principal Place of Business 3471 N. FEDERAL HIGHWAY SUITE 310 FORT LAUDERDALE FL 33306 Mailing Address 3471 N. FEDERAL HIGHWAY SUITE 310 FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 33306					6					
Principal Place of Business 3. Mailing Address					****		I INDIIENI IID INII INII DOILI BOLII I		mı götüğ gırı innı	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State City & State						4. F	El Number 65-0925617	├ ──÷	Applied For Not Applicable	
Zip	Country		Zip Count		ry	5. Certificate of Status Desired See Required				
	6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
					Name					
GROSS, DANIEL T					Street Address (P.O. Box Number is Not Acceptable)					
3471 N. FEDERAL HIGHWAY FORT LAUDERDALE FL 33306										
TOTAL ENGINEER TE GOOD					City FL Zip Code					
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) (NOTE: Registe FILE NOW!!! FEI After May 1, 2002 Fee Make Check Payable to I					vill be \$550.0	00	Election Campaign Finar Trust Fund Contribution.		.00 May Be led to Fees	
11.		OFFICERS AND DI	RECTORS	12.		AD	DITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GROSS, DANIEI 3471 N. FEDER FORT LAUDERD	al Highway	☐ Delete		IT ADDRESS ST-ZIP			Chang	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD BASSO, LLOYD 3471 N. FEDER FORT LAUDERD	al Highway	☐ Delete		T ADDRESS ST-ZIP			☐ Chang	e Addition	
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	VD FRIED, STEVEN 3471 NORTH FI FORT LAUDERD	Delete-	TITLE NAME STREE				Change	e Addition		
TITLE NAME STREET ADDRESS	PORT LAUDERL	ALE PL 33308	☐ Delete	TITLE NAME STREE	T ADDRESS			☐ Chang	e 🔲 Addition	
CITY-ST-ZIP TITLE NAME			☐ Delete	TITLE NAME	ST-ZIP			☐ Chang	e Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			☐ Delete	CITY- TITLE NAME	\$T-ZIP			☐ Change	e Addition	
CITY-ST-ZIP 13. I hereby of indicated of the conchanged,	certify that the inform on this report or su poration or the rece , or on an attachmen	mation supplied with the pplemental report is trained in the property of the p	nis filling does not qualify fo ue and accurate and that r ered to execute this report if all other like empowered	r the even	ST-ZIP nption stated in ure shall have the dot by Chapter	n Section the same I 607, Flori	119.07(3)(i), Florida Statutes. I fu legal effect as if made under oat da Statutes; and that my name a	orther certify that the th; that I am an office appears in Block 11	information er or director or Block 12 if	

SIGNATURE: