

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000067812

1. Entity Name

SOUTH FLORIDA LEGAL ARTS, INC.

FILED

Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90083 047 ***150.00

Principal Place of Business

Mailing Address

~~1201 HARDEE ROAD~~
~~CORAL GABLES FL 33146~~

~~1201 HARDEE ROAD~~
~~CORAL GABLES FL 33146-3230~~

135 S.W. 57 AVE
MIAMI, FL 33144

135 S.W. 57 AVE
MIAMI, FL 33144

2. Principal Place of Business

3. Mailing Address

135 SW 57th AVE

SAME

Suite, Apt. #, etc.

SAME

City & State

MIAMI FL.

City & State

SAME

Zip

33144

Country

USA

Zip

Country

4. FFI Number

* 65 098 4205

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOSS, PHILIP E JR., ESQ
1201 HARDEE ROAD
CORAL GABLES FL 33146

Name JOHN REBSTOCK

Street Address (P.O. Box Number is Not Acceptable)

135 S.W. 57 AVE

City MIAMI

FL

Zip Code 33144

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 (applies to (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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME GOSS, PHILIP E JR., ESQ
STREET ADDRESS 1201 HARDEE ROAD
CITY-ST-ZIP CORAL GABLES FL 33146

☒ Delete

TITLE GP D
NAME JOHN W. REBSTOCK
STREET ADDRESS 135 SW 57th AVE
CITY-ST-ZIP MIAMI FL 33144

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE UP D
NAME MARGARITA JENRA
STREET ADDRESS 135 SW 57th AVE
CITY-ST-ZIP MIAMI, FL 33144

☒ Change ☐ Addition

TITLE
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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

Date

Daytime Phone #

CR2E034 (9/99)