

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082932

1. Entity Name
MOGERMAN, O'LEARY & PATEL, III, INC.

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90059 018 ***150.00

Principal Place of Business
701 N.W. 19TH STREET, #100
FT. LAUDERDALE FL 33311

Mailing Address
701 N.W. 19TH STREET, #100
FT. LAUDERDALE FL 33311

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0949862**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

~~PATEL, PRAKASH -~~
~~701 N.W. 19TH STREET, #100~~
~~FT. LAUDERDALE FL 33311 -~~

Name
DAMASO W. SAAVEDRA, ESQ.

Street Address (P.O. Box Number is Not Acceptable)
312 S.E. 17TH STREET, 2ND FLOOR

City **FORT LAUDERDALE** **FL** Zip Code **33316**

8. The above named entity certifies 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 **1/15/2001**

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, 2001 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 ☐ Delete
NAME **D**
STREET ADDRESS **MOGERMAN, IRWIN R**
CITY-ST-ZIP **10040 S.W. 2ND STREET**
FT. LAUDERDALE FL 33324

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **O'LEARY, MICEAL**
CITY-ST-ZIP **3471 N. FEDERAL HIGHWAY, #601**
FT. LAUDERDALE FL 33306

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PATEL, PRAKASH**
CITY-ST-ZIP **701 N.W. 19TH STREET, #100**
FT. LAUDERDALE FL 33311

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)