

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000097247

1. Entity Name
WERMUTHLAW P.A.

FILED
Apr 14, 2001 8:00 am
Secretary of State

04-14-2001 90024 021 ***150.00

Principal Place of Business

**8300 NW 53 STREET
 STE 300
 MIAMI FL 33166**

Mailing Address

**8300 NW 53 STREET
 STE 300
 MIAMI FL 33166**

2. Principal Place of Business

**8300 NW 53 Street
 Suite, Apt. #, etc.
 308**

3. Mailing Address

**8300 NW 53 Street
 Suite, Apt. #, etc.
 Suite 308**

City & State
Miami, FL

City & State
Miami, FL

Zip
33166

Country
USA

Zip
33166

Country
USA

4. FEI Number **65-0954814**

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

**WERMUTH, J. MICHAEL
 8300 NW 53 STREET
 STE 300
 MIAMI FL 33166**

Name

Wermuth, J. Michael

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

8300 NW 53 Street

Suite 308

City

Miami

FL

Zip Code
33166

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

J. MICHAEL WERMUTH, PRESIDENT

4/11/01

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 **D** ☐ Delete
 NAME **WERMUTH, J. MICHAEL**
 STREET ADDRESS **8300 NW 53 ST STE 300**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE **D / P** ☒ Change ☐ Addition
 NAME **Wermuth J. Michael**
 STREET ADDRESS **8300 NW 53 Street, Suite 308, Miami, FL 33166**
 CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **S** ☐ Delete
 NAME **WERMUTH, ASTRID**
 STREET ADDRESS **8300 NW 53RD ST STE 300**
 CITY-ST-ZIP **MIAMI FL 33166**

TITLE **S** ☒ Change ☐ Addition
 NAME **Wermuth, Astrid**
 STREET ADDRESS **8300 NW 53 Street, Suite 308**
 CITY-ST-ZIP **Miami, FL 33166**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
 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:

J. MICHAEL WERMUTH, President
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/11/01 305-715-7157

CR2004 (10/00)