## 2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # \$23736** 1. Entity Name LEE MOLDOFF, A.I.A. ARCHITECTS & ASSOCIATES, INC Principal Place of Business Mailing Address 7436 WILES RD. 7436 WILES RD. CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country

6. Name and Address of Current Registered Agent

MOLDOFF, LEE

7436 WILES RD.

SIGNATURE

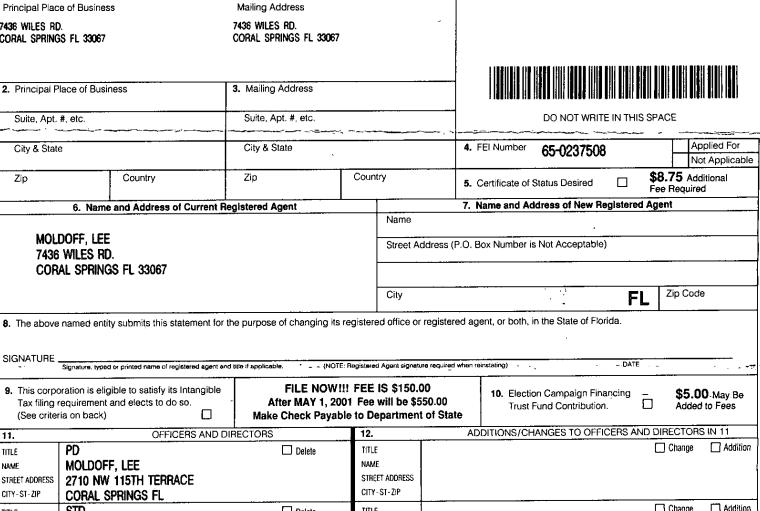
**CORAL SPRINGS FL 33067** 

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

## Apr 20, 2001 8:00 am Secretary of State

04-20-2001 90009 014 \*\*\*150 00



(See Criteria on back)		Make Check Payable to Department of State					
11.	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOLDOFF, LEE 2710 NW 115TH TERRACE CORAL SPRINGS FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MOLDOFF, FRANCES 2710 NW 115TH TERRACE CORAL SPRINGS FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition Addition
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FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Name

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 BIGNING OFFICER OR DIRECTOR