

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90042 012 ***150.00

DOCUMENT # S51573

1. Entity Name

STEPHEN GORDET ASSOCIATES, INC.

Principal Place of Business

**180 N.E. 39TH STREET, SUITE 218
 MIAMI FL 33137**

Mailing Address

**180 N.E. 39TH STREET, SUITE 218
 MIAMI FL 33137**

2. Principal Place of Business

10800 Biscayne Blvd.

Suite, Apt. #, etc.

Suite 440

City & State

Miami, FL

Zip

33161

Country

USA

3. Mailing Address

10800 Biscayne Blvd.

Suite, Apt. #, etc.

Suite 440

City & State

Miami, FL

Zip

33161

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0262874

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GORDET, STEPHEN
 555 NE 34TH ST
 STE 2701
 MIAMI FL 33137**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Stephen Gordet
[Signature]

President

3/12/01

Signature, typed or printed name of registered agent and title if applicable.

(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. ☐

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

TITLE **PST** ☐ Delete
 NAME **GORDET, STEPHEN**
 STREET ADDRESS **555 NE 34TH ST #2701**
 CITY-ST-ZIP **MIAMI FL**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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

Stephen Gordet - Pres. 3/12/01

Date

Daytime Phone #

(305) 899-9999

CR2E034 (10/00)