

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 01, 2002 8:00 am**  
**Secretary of State**

03/2099 AV

**DOCUMENT # V01393**

1. Entity Name  
**MICHAEL H. GORA, P.A.**

02-01-2002 90033 014 \*\*\*150.00

Principal Place of Business  
**1801 N MILITARY TRAIL**  
**SUITE 200**  
**BOCA RATON FL 33431**

Mailing Address  
**1801 N MILITARY TRAIL**  
**SUITE 200**  
**BOCA RATON FL 33431**

**915237**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-3031985**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HRAWG CORP.**  
**1801 N MILITARY TRAIL**  
**SUITE 200**  
**BOCA RATON FL 33431**

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 \_\_\_\_\_  
 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. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD GORA, MICHAEL H 1801 N MILITARY TRAIL BOCA RATON FL 33431</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: \_\_\_\_\_

**MICHAEL H. GORA**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Melanie D. Kamburian  
Corporate Paralegal  
Direct Dial: 561.862.4182  
mkamburi@hodgsonruss.com

Attachment 915237  
Doc# VOI393

**HodgsonRuss**  
ATTORNEYS • LLP

January 18, 2002

Florida Department of State  
Division of Corporations  
UBR Filings  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Sir/Madame:

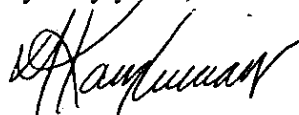
Re: Michael H. Gora, P.A. (the "Corporation")  
2002 Uniform Business Report

We serve as registered agent for the above referenced corporation. On behalf of the Corporation, enclosed herewith is the 2002 Uniform Business Report including our client's check in the amount of \$150.00 representing the annual fee.

Please review the enclosed and advise the undersigned of the status of the Corporation. Your consideration in this matter is greatly appreciated.

Should you have any questions regarding the above, please do not hesitate to call me directly.

Very truly yours,



Melanie D. Kamburian  
Corporate Paralegal

Enclosures

cc: Michael H. Gora, Esq.