

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90090 002 ***150.00

DOCUMENT # V01393

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



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**



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**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
GORA, MICHAEL H
1801 N MILITARY TRAIL
BOCA RATON FL 33431** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michael H. GORA 1-10-03 (561) 394-0800

CR2E034 (10/02)

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

Hodgson Russ
ATTORNEYS • LLP

Attachment #
8000437

Florida Department of State
Division of Corporations
UBR Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: MICHAEL H. GORA, P.A.
2003 Uniform Business Report

We serve as registered agent for the above referenced Florida professional service corporation. On behalf of the said corporation, enclosed is the 2003 Uniform Business Report, together with a check in the amount of \$150.00 representing the state's annual filing fee.

Your consideration in this matter is greatly appreciated.

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

W. Kamhuwan

Melanie D. Kamburian

cc: Michael H. Gora, Esq.