

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90342 034 ***150.00

DOCUMENT # V02750

1. Entity Name
HENRY GOLDMAN, P.A.



Principal Place of Business
3303 INVERRARY BLVD W.
LAUDERHILL FL 33319
US

Mailing Address
3303 INVERRARY BLVD W.
LAUDERHILL FL 33319
US

2. Principal Place of Business

100 S. PINE ISLAND RD.

Suite, Apt. #, etc.

Suite 200

City & State

PLANTATION, FLORIDA

Zip

33024

Country

USA

3. Mailing Address

100 S. PINE ISLAND RD.

Suite, Apt. #, etc.

Suite 200

City & State

PLANTATION, FLORIDA

Zip

33024

Country

USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0307046

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDMAN, HENRY

3303 INVERRARY BLVD W.

LAUDERHILL FL 33319

7. Name and Address of New Registered Agent

Name

GOLDMAN, HENRY

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

100 S. PINE ISLAND RD.

Suite 200

City

PLANTATION

FL

Zip Code

33024

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:

Henry Goldman P.A.
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/07/03

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

TITLE	S	<input type="checkbox"/> Delete
NAME	GOLDMAN, DOROTHY	
STREET ADDRESS	3303 INVERRARY BLVD W.	
CITY-ST-ZIP	LAUDERHILL FL 33319	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDMAN, DOROTHY	
STREET ADDRESS	100 S. PINE ISLAND RD., Suite 200	
CITY-ST-ZIP	PLANTATION, FL 33024	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 another like empowered.

SIGNATURE:

Henry Goldman P.A.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HENRY GOLDMAN P.A. **04/07/03** **954-337-0769**
Date Daytime Phone #

CR2E034 (10/02)