t. Entity Nam		/ X	THE STA	
DOCUMENT # V06278 1. Entity Name BARRY M. BLUMENTHAL, D.O., P.A.				AUG 13 PM 2:21
Principal Plac 621 ISLAND R MIAMI FL 331 US	D	Mailing Address 621 ISLAND RD MIAMI FL 33137 US	TĂ	SECRETARY UF STATE SECRETARY UF STATE ALLAHASSEE, FLORIDA
2. Principal Place of Business		3. Mailing Address		
Suile, Apt. #, etc.		Suite, Apt. #, etc.	<u></u>	CHECK HERE IF MAKING CHANGES
City & State		City & State	<u> </u>	4. FEI Number 65-0312455 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired Status Desired Se Required
	6. Name and Address of Current	Registered Agent	Nomo	7. Name and Address of New Registered Agent
	HÀL, BARRY M	1	Name Street Addres	ss (P.O. Box Number is Not Acceptable)
621 ISLAND RD MIAMI FL 33137				
		$\overline{)}$		FL Zip Code
	named entity submissing sintement in	of the purpose of changing it	s registered office or legis	stered agent, or both, in the State of Florida. 1 am familiar with, and accept
SIGNATURE -		1 V A		883
	LE NOWIN FEE IS \$150.00	t and the discontenie (NC	NF. Registered Agent signature requ	ared whon reinstating) DATE
After Make Check	May 1, 2003. Fee will be \$550.00 Payable to Florida Department c	of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10. DILE	D		. TITLE	
STREET ADDRESS	BLUMENTHAL, BARRY M 621 ISLAND RD MIAMI FL 33137		NAME STREET ADORESS CITY-ST-ZIP	00/10/00~~01000~023 ##150.00 j
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NAME STREET ADORESS CIT+-ST-ZIP	ertily that the information supplied with	1 this filing cloes no quality to	CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes. I further certily that the information
64ME STREET ADDRESS CIT+-ST-ZIP	ertily that the information supplies with on this report or supplementation (porti- poration or the receiver driving address, or on an attachment with a ddgress,	n this filture closes na quality to strue and accurate) and that swared to execute Anis report with all other like empswered		Section 119.07(3)(i), Florida Statutes, I further certily that the information esame legal effect as if made under oath, that I am an officer or cirector 307, Florida Statutes; and that my name appears in Block 10 or Block 11 if

rlorida DOS Division of Corporations - Online Payment

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Page 1 of 1

Plorida Department of State, Division of Cornorations, * 1 (...) Electronic Filing 850-488-9000 amania saadhin amp 160 **Online Payment System** PAYMENT RECEIPT -- DUPLICATE --This receipt is from the PREVIOUS payment attempt. PINE Your account has only been charged once. Corp Am. **Transaction Amount:** \$150.00 Comp Reinin Email Address: bluace@stis.net Fict . Name Date/Time Paid: 03/30/2003 16:00:46 8.50 JUS 6656 **Payment ID Number:** 1005355 Ĉerk. An Mar Z **Reference Number:** 300014930293 Thank you for using the Late 3 LINK COV 8/4/3 Online Payment System. Spenk 4 Print this receipt for your records. $\lambda u(\Sigma)$ You MUST select continue in order to receive your antina **CONFIRMATION** from the State. xacyment right Continue .245.6.939

Barry M. Blumenthal, D.O., P.A.

August 8, 2003
Dept of Corporations
Barry M. Blumenthal, D.O.
UBR - On Line Payment Document #V06278

On March 31, 2003 I thought that I had processed and paid the \$150.00 fee for my UBR through the <u>www.Sunbiz.org</u> web site. I am attaching the receipt which includes the payment ID and Reference numbers.

Just last week I received another request for filing. Upon contacting several departments and ultimately speaking with the on-line help desk, they have advised me that for some reason, they show two attempts to process payment that failed. They never notified me of the failure.

The on-line help desk recommended that I send you this information in addition to a check in the amount of \$150.00 which is enclosed.

Please send confirmation of receipt to: Barry M. Blumen hal 621 Island/Rd. Miami, FL 331 Thank you for your natter.