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

## DOCUMENT # V21838

1. Entity Name

WILBUR, GREENSTEIN AND QUINTELA, M.D.'S, P.A.



## FILED Feb 11, 2003 8:00 am Secretary of State

02-11-2003 90083 028 \*\*\*150.00

Size Country    Size   Country   Size   Country   Size   S				GOD WE THE			
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  S. Certificate of Status Desired  Sa. 75 Additional Fee Required  For Required  Page Required  Street Address (PO, Box Number is Not Acceptable)  Street Address	9850 STIRLING RD SUITE 103 COOPERCITY FL 33024-8024		9850 STIRLING RD SUITE 103 COOPERCITY FL 33024-8042				
City & State    City & State   Country   Zip   Country   S. Certificate of Status Desired   S8.75 Additional Feedback   Feedback   S8.75 Additional Feedback   S8.75 Addit	2. Principal Pl	ace of Business	3. Mailing Address		1 1981/ 8/18/8 1180/ 1183/ 18/18/ 1/18/ 18/18		
Country   Zip   Country   Zip   Country   5, Certificate of Status Desired   SAdditional Fee Required   6. Name and Address of Current Registered Agent   Name	Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
6. Name and Address of Current Registered Agent  Name  WILBUR, RICHARD J.  9850 STIRLING RD  SUITE 103  COOPER CITY FL 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 acceptable)  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN II  FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN II  FILE WP  NAME  NAME  NAME  NAME  SIREET ADDRESS  CITY-ST-ZP  Delete  TITLE  VP  QUINTELA, PABLO  SIRRET ADDRESS  CITY-ST-ZP  Delete  TITLE  VP  WILBUR, RICHARD J  9850 STIRLING RD, SUITE 103  COOPER CITY FL 33024  Delete  TITLE  VP  WILBUR, RICHARD J  9850 STIRLING RD, SUITE 103  COOPER CITY FL 33024  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZP  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZP  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZP  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZP  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZP  Delete  T	City & State		City & State	.,	4. FEI Number 65-0320256	Applied For Not Applicable	
WILBUR, RICHARD J. 9850 STIRLING RD SUITE 103 COOPER CITY FL 33024  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 acceptive obligations of registered agent, bod or period name of registered agent and title applicable.  SIGNATURE Signame, bod or period name of registered agent and title it applicable.  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OPFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  TITLE NAME 9850 STIRLING RD #103 COOPERCITY FL 33024  TITLE NAME STREET ADDRESS CITY-ST-2P QUINTELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE VP UNITELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE VP UNITELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE VP UNITELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE VP UNITELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE VP UNITELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE VP UNITELA NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE VP UNITELA NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE VP NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE VP NAME NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME NAME TITLE VP NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME NAME TITLE NAME COOPER CITY FL 33024  Delete TITLE NAME COOPER CITY FL 33024  Delete TITLE NAME COOPER CITY FL 33024	Zip	Country	Zip	Country			
WILBUR, RICHARD J. 9850 STIRLING RD SUITE 103 COOPER CITY FL 33024  6. 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 acceptable or project and state applicable.  SIGNATURE Signature, Roped or primed name of rigiptives agent and state it applicable.  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  TITLE MAME STREET ADDRESS CITY ST-2P QUINTELA, PABLO 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE WIRDLE, RICHARD J. 9850 STIRLING RD, SUITE 103 COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS CITY-ST-2P  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024  Delete TITLE NAME STREET ADDRESS COOPER CITY FL 33024	<u> </u>	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered A	gent	
SUITE 103 COOPER CITY FL 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 Signature, hyped or printed name of registered agent and title if applicable.  (MOTE Registered Agent signature required when reinstating)  After May 1, 2003 Fee will be \$550.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT ILE  MARC H GREENSTEIN MD  9850 STIRLING RD \$103  COOPERCITY FL 33024  CITY-ST-ZIP  VP  MARC AGREENSTEIN MD  9850 STIRLING RD, SUITE 103  COOPERCITY FL 33024  CITY-ST-ZIP  VP  WILBUR, RICHARD J  9850 STIRLING RD, SUITE 103  COOPER CITY FL 33024  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZIP  WILBUR, RICHARD J  9850 STIRLING RD, SUITE 103  COOPER CITY FL 33024  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZIP  COOPER CITY FL 33024  Delete  TITLE  NAME  SIRRET ADDRESS  CITY-ST-ZIP  COOPER CITY FL 33024  Delete  TITLE  NAME  SIRRET ADDRESS  COOPER CITY FL 33024  Delete  TITLE  NAME  NAM		No.		Name			
SUTTE 103 COOPER CITY FL 33024  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  FILE NOWI!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.  TILE NAME STREET ADDRESS CITY-ST-ZIP OUNTELA, PABLO SIRRET ADDRESS OCTY-ST-ZIP OUNTELA, PABLO	WILBUR, RICHARD J.			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
SUITE 103 COOPER CITY FL 33024  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, report or printed name of registered agent and title if applicable. (MOTE Registered Agent signature required when revination):  DATE  FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  ITILE  WARC H GREENSTEIN MD MARE MARC H GREENSTEIN MD STREET ADDRESS COLYS-12-2P COUNTELA, PABLO OWNTELA, PABLO	•			Sueet Addres	S (1.0. DOX (Admitted to the Charles)		
CITY FL 33024  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its 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						]	
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THE Obligations of registered agent.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent alignature required when reinstalling)   DATE	*			'			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State  10. OFFICERS AND DIRECTORS  TITLE NAME MARC H GREENSTEIN MD STREET ADDRESS CITY-ST-ZIP  OUINTELA, PABLO SIREET ADDRESS CITY-ST-ZIP  OUINTELA, PABLO SIREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME NAME NAME NAME TITLE NAME NAME NAME NAME NAME NAME NAME NAM	the obligation	lons of registered agent.					
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MARC H GREENSTEIN MD STREET ADDRESS CITY-ST-ZIP COOPERCITY FL 33024  TITLE NAME QUINTELA, PABLO STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  Obelete TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  ODElete TITLE NAME TITLE NAME  TITLE NAME  TITLE NAME  ODElete TITLE NAME  TITLE NAME  ODELET  TITLE NAME  TITLE NAME  ODELET  TITLE NAME  ODELET  TITLE NAME  ODELET  TITLE NAME  ODELET  ODELET  TITLE NAME	10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND		
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CITY-ST-7IP	TITLE NAME STREET ADDRESS	COOPER CITY FL 33024	☐ Celete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filling 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 all other like empowered.

TITLE

NAME

NAME

STREET ADDRESS

TITLE . ... rays

STREET ADDRESS

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CITY-ST-ZIP

Delete

SIGNATURE:

NAME

TITLE

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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2/05/03 437-1500
Date Date Dayline Phone #

☐ Change

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