

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90120 013 ***158.75

0007146

DOCUMENT # F00000006649

1. Entity Name

MEDITECH FEFER, INC.

Principal Place of Business

Mailing Address

3581 INVERRARY DRIVE, BLDG C, SUITE 101
 FT. LAUDERDALE FL 33319

3581 INVERRARY DRIVE, BLDG C, SUITE 101
 FT. LAUDERDALE FL 33319

2. Principal Place of Business

3107 W. HALLANDALE BOY BLD

3. Mailing Address

P.O. BOX 8714

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 103

City & State

HALLANDALE, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

65-0993885

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

33351

Country

USA

Zip

33310

Country

USA

6. Name and Address of Current Registered Agent

JOHNSON, STANLEY JR.
1444 BISCAYNE BLVD., SUITE 230
MIAMI FL 33132

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, 2001 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	PT	<input type="checkbox"/> Delete
NAME	BLYTHE, CLEVELAND	
STREET ADDRESS	3776 NW 91 LANE	
CITY-ST-ZIP	SUNRISE FL 33335	
TITLE	WVC	<input type="checkbox"/> Delete
NAME	JOHNSON, STANLEY JR.	
STREET ADDRESS	1444 BISCAYNE BLVD., SUITE 230	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	SC	<input type="checkbox"/> Delete
NAME	THOMPSON, WINSTON	
STREET ADDRESS	1311 SW 102 AVE	
CITY-ST-ZIP	PEMBROKE PINE FL 33025	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	BLYTHE, CLEVELAND	
STREET ADDRESS	3776 NW 91 LANE	
CITY-ST-ZIP	SUNRISE FL 33335	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEBLANC, ROGER	
STREET ADDRESS	713 CRANDON BLVD. SUITE 203	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLYTHE, CLEVELAND	
STREET ADDRESS	3776 N.W. 91 LANE	
CITY-ST-ZIP	SUNRISE, FL 33335	
TITLE	D/V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHNSON, JR., STANLEY E.	
STREET ADDRESS	201 N.W. 7 STREET, # 304	
CITY-ST-ZIP	MIAMI, FL 33136	
TITLE	D/C/V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMPSON, WINSTON	
STREET ADDRESS	1311 SW 102 AVENUE	
CITY-ST-ZIP	PEMBROKE PINES, FL 33025	
TITLE	D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LAING, VASHTI	
STREET ADDRESS	6441 N.W. 199 LANE	
CITY-ST-ZIP	HALEAH, FL 33015	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEAVER, LYNN E.	
STREET ADDRESS	9780 S. TROPICAL TRAIL	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEE ATTACHED SHEET	
STREET ADDRESS	ATTACHMENT "A"	
CITY-ST-ZIP		

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:

Stanley E. Johnson Jr.
STANLEY E JOHNSON JR

SECRETARY/VP

3-31-01 954-967-2570

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment: "A"
A0042589

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Entity Name: MEDITECH FEFER, INC.

Line 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

Addition T

Haft, Glenn R.
1200 South Pine Island Road, Suite 475
Plantation, FL 33324-4470

Addition D

Thomas, Carlos O.
10955 S W 15th Street, Apt 212
Pembroke Pines, FL 33025