

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90001 025 ***158.75

DOCUMENT # P40065

1. Entity Name

D. A. DEBENEDICTIS, LTD., INC.

Principal Place of Business

**31000 TELEGRAPH RD.
 SUITE 100
 BINGHAM FARMS MI 48025**

Mailing Address

**31000 TELEGRAPH RD.
 SUITE 100
 BINGHAM FARMS MI 48025**

644276



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **38-2349306**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**DEBENEDICTIS, DAVID A.
 2255 GLADES RD, SUITE 324 ATRIUM
 BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name Same
 Street Address (P.O. Box Number is Not Acceptable)
1140 Holland Drive, Suite 4
 City Boca Raton FL Zip Code 33487

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

David A. DeBenedictis

4/18/01

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

(NOTE: Registered Agent's 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	DEBENEDICTIS, DAVID A.	2931 BANYAN BLVD. CIRCLE NW	BOCA RATON FL	<input type="checkbox"/>
AS	DUCHARME, PATRICIA A.	209 E HIGHLAND	BLOOMFIELD HILLS MI 48302	<input type="checkbox"/>
ST	DEBENEDICTIS, JANICE E.	2931 BANYAN BLVD CIRCLE NW	BOCA RATON FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

David A. DeBenedictis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01
 Date

(561) 998-9697
 Daytime Phone #

CR2E034 (10/00)