2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State
04-08-2002 90241 021 ***150.00

0359468 AV

DOCUMENT # **P98000006371**

1. Entity Name
BAR MANAGEMENT ADVISORS, INC.

Principal Place of Business	Mailing Address
GARDENS CORPORATE CENTER 3801 PGA BLVD SUITE 555 PALM BEACH GARDENS FL 33410	GARDENS CORPORATE CENTER 3801 PGA BLVD SUITE 555 PALM BEACH GARDENS FL 33410
3801 PGA Boulevard Suite 600 Palm Beach Gardens, FL 33410	3801 PGA Boulevard Suite 600 Palm Beach Gardens, FL 33410

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0805853 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
REGSERV CORP. GARDENS CORPORATE CENTER 3801 PGA BOULEVARD SUITE 555 PALM BEACH GARDENS FL 33410	REGSERV CORP. 3801 PGA Boulevard Suite 600 Palm Beach Gardens, FL 33410 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, 2002 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST RENDINA, BRUCE A GCC - 3801 PGA BLVD SUITE ~~555~~ 600 PALM BEACH GARDENS FL 33410	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (9/01)

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: [signature] Bruce A. Rendina President 2/27/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

561-630-5055