

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000065414

1. Entity Name

BROWN AND BENGISU, P.A.

FILED

Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90016 018 ***150.00

Principal Place of Business Mailing Address
333 W. CAMINO GARDENS BLVD., SUITE 204C 333 W. CAMINO GARDENS BLVD., SUITE 204C
BOCA RATON FL 33432 BOCA RATON FL 33432-5824



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 65-0853572		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BENGISU, DOGAN M ESQ.
333 W. CAMINO GARDENS BLVD., SUITE 204C
BOCA RATON FL 33432

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) <input type="checkbox"/>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

PD BENGISU, DOGAN M 333 W. CAMINO GARDENS BLVD., SUITE 204C BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP PRESIDENT DIRECTOR ALICE E. BROWN, ESQ. 333 W. Camino Gardens Blvd., Suite 204C Boca Raton, FL 33432 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
SD BROWN, ALICE E 333 W. CAMINO GARDENS BLVD., SUITE 204C BOCA RATON FL 33432 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP SECRETARY DIRECTOR DOGAN M. BENGISU, ESQ. 333 W. Camino Gardens Blvd., Suite 204C Boca Raton, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *Alice E. Brown*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-2000 561-750-6944
Date Daytime Phone #

CR2E034 (9/99)