

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2001 8:00 am
Secretary of State

0190713

DOCUMENT # P98000081956

1. Entity Name
HELLER, CHAMES & GARCIA, P.A.

04-23-2001 90026 039 ***150.00

Principal Place of Business Mailing Address
888 BRICKELL AVE SUITE 202 **888 BRICKELL AVE SUITE 202**
MIAMI FL 33131 **MIAMI FL 33131**

64271



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
888 Brickell Avenue **888 Brickell Avenue**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
Sixth Floor **Sixth Floor**
 City & State City & State
Miami, Florida **Miami, Florida**
 Zip Country Zip Country
33131 **U.S.A.** **33131** **U.S.A.**

4. FEI Number **59-2932550** 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

HELLER, JONATHAN A
888 BRICKELL AVE SUITE 202
MIAMI FL 33131

Name
Jonathan A. Heller
 Street Address (P.O. Box Number is Not Acceptable)
888 Brickell Avenue
Sixth Floor
 City **FL** Zip Code
Miami **33131**

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 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELLER, JONATHAN A 888 BRICKELL AVE SUITE 202 MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 888 Brickell Avenue, 6th Floor Miami, Florida 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAMES, DEBORAH S 888 BRICKELL AVE SUITE 202 MIAMI FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 888 Brickell Avenue, 6th Floor Miami, Florida 33131
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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: Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)