

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 28, 2002 8:00 am**  
**Secretary of State**

01-28-2002 90042 041 \*\*\*150.00

**DOCUMENT # P00000054290**

1. Entity Name  
**BPR ENTERPRISES INC.**

Principal Place of Business  
**671 NE 118TH ST.  
 BISCAYNE PARK FL 33161**

Mailing Address  
**671 NE 118TH ST.  
 BISCAYNE PARK FL 33161**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**c/o TR HERRERA**

3. Mailing Address  
**c/o TR HERRERA**

Suite, Apt. #, etc.  
**1250 E. HALLANDALE BCH BLVD #1004**  
 City & State  
**HALLANDALE, FL**

Suite, Apt. #, etc.  
**1250 E. HALLANDALE BCH BLVD #1004**  
 City & State  
**HALLANDALE, FL**

4. FEI Number **65-1014066**

Applied For  
 Not Applicable

Zip **33009** Country **USA**

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

**6. Name and Address of Current Registered Agent**

**ROBBIE, BRIAN P  
 671 NE 118TH ST.  
 BISCAYNE PARK FL 33161**

**7. Name and Address of New Registered Agent**

Name **ROBBIE, BRIAN P.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**c/o TR HERRERA**  
**1250 E. HALLANDALE BCH BLVD #1004**  
 City **HALLANDALE** FL Zip Code **33009**

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 **X Brian Robbie**

**01/17/02**

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**

TITLE **D** ☐ Delete  
 NAME **ROBBIE, BRIAN P**  
 STREET ADDRESS **671 NE 118TH ST.**  
 CITY-ST-ZIP **BISCAYNE PARK FL 33161**

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

TITLE **DP** ☒ Change ☐ Addition  
 NAME **ROBBIE, BRIAN P.**  
 STREET ADDRESS **1250 E. HALLANDALE BCH BLVD #1004**  
 CITY-ST-ZIP **HALLANDALE, FL 33009**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition  
 NAME  
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 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 **X Brian Robbie** **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**01/17/02** **954-457-0970**  
 Date Daytime Phone #

CR2E034 (9/01)