## OFFIT CORPORATION ON THE PROPERTY (UBR)

DOCUMENT # F99000006573

GERALD E. BIALA, LTD., INC.



FILED

03 JAN 29 PH 1:19

SECRETARY OF STATE TALLAHASSFE FLORIDA

## DO NOT WRITE IN THIS SPACE

2. Principal Place 2185 (	e of Business OUN MORE LANE	3. Mailing Address 2185 (	3. Malling Address 2185 OUN ADOLE LANE		
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.		
City & State VENO BEACH FL.		City & State VEROBEACH, FL.			
Zip	Country	Zip	Country		

DO NOT WRITE IN THIS SPACE

City & State VERO BEACH FL	City & State VENOBERE	H, FL.	4. FEI Number 36 - 422	6681	Applied For Not Applicable
Zip 329C3 Country INOIN	PINER 32963	Country  FNOVAD CIVER	5. Certificate of Status Desired	Feel	75 Additional Required

## DO NOT WRITE IN THIS SPACE

7. Hallie and Address of Culterit Registered Agent				
Name	GERALD E. BIALA			
_Street A	ddress (P.O. Box Number is Not Acceptable)			

	•	0,	VERD BEACH		TL	3290	<u> </u>
8.	The above named entity submits this statement for the purpose of changing its register	ed office	e or registered agent, or both,	in the State of Florida.	l am fam	iliar with, and	l accept
	16 15 P 17 1 12 to a						

the benganation of regiments again.		
· ·		
·		
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agest adjustice required minimization)	DATE
Inches 4 May 4 Eas In \$450.00	i	

January 1 - May 1 Fee Is \$150.00
After May 1, Fee Is \$550.00
Amended UBR Is \$61.25
Make Check Payable to Florida Department of State

Election Campaign Financing Trust Fund Contribution. \$5.00 May 8e Added to Fees

Zin Code

10.	OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPST GENALO E. BIALA 2185 DUN MONE CAME VEND BEDEN, FL. 32963	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300011879283 02/05/0301017026 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS GITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-SI-ZIP		TITLE NAME STREET ADDRESS CHY-ST-ZP	
TITLE NAME STREET AODRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

22 JANUARS 2003 772/231-9989

Daytime Phone #

gs 1/25

## GERALD E. BIALA, LTD

2185 Dunmore Lane Vero Beach, FL 32963 (561) 231-9989

January 22, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee,-FL-32302-1500

Dear sir,

I have not received a mailing of the Uniform Business Report for 2002. This was not discovered until preparing my taxes.

Per your instructions I have enclosed a downloaded form from the internet site and a check for \$150.00.

Thank you,

Gerald E. Biala

Dentle Gal

**Enclosures** 

2 Com. 15 15

in the contract of the contrac