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2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 05, 2002 8:00 am 442147 DOCUMENT # **Secretary of State** 1. Entity Name BOLENDER ENTERPRISES, INC. 03-05-2002 90137 044 ***150.00 Principal Place of Business Mailing Address 601 NE 42ND STREET 601 NE 42ND STREET FT. LAUDERDALE FL 33334-3140 FT. LAUDERDALE FL 33334-3140 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-1498407 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -=BOLENDER, (CHARLES.L.) -Street Address (P.O. Box Number is Not Acceptable) **BOLENDER ENTERPRISES INCNG** 601 N E 42ND STREET FORT LAUDERDALE FL 33308 City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (9/01) ☐ Addition TITLE ☐ Delete TITLE BOLENDER, CHARLES L NAME NAME 601 N.E. 42ND STREET STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE **BOLENDER, THOMAS E** NAME NAME 601 N.E. 42ND STREET STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE **BOLENDER, DORIS** NAME NAME 601 N.E. 42ND STREET STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition BOLENDER, JOHN J. NAME NAME 601 N.E. 42ND STREET STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 at