2001 UNIFORM BUSINESS REPORT (UBR)

<u>u</u>			<u> </u>	-				
DOCUMENT # 523 291 1. Entity Name								,
Reinman, Inc.								
Principal Place of Business Mailing Address				01 JUL 25 AM 10: 54				
1923 N.E. 150th Street				SECRETARY OF STATE				
North Miami, FL 33181				TALLAHASSEE. FLORIDA				
2. Principal Place of Business 1923 N.E. 150th ST. 3. Mailing Address P.O. Box 63029								
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE and The				
City & State North Miami, FL City & State Miami, FL				4. FEI Number Applied For / S9 – 1 7 1 5 3 3 Not Applicable				
Zip 33181 Country USA	^{Zip} 33163	Country USA		5 . Cer	tificate of Status Desired		8.75 Ad	
6. Name and Address of Current R	legistered Agent		ليعفيه تعليب	7. Nar	ne and Address of New R	-	<u>.</u>	-
W. Berline Bellemen			Name	G 3 1/2				
-V. Brice Reinman 1923 N.E. 150th Street Miami FL 33181			Street Address (<u>- SAM</u> P.O. Box	Number is Not Acceptable	······································		
							_	
			City	·		FL	Zip Co	de
8. The above named entity submits this statement for	the purpose of changing its	egistere	d office or register	ed agent	, or both, in the State of Flo	orida.		
SIGNATURE	d title if applicable. (NOTE:	Registered	d Agent signature required	when reinsta	ating)	DATE		
9. This corporation is eligible to satisfy its Intangible	FILE NOW!!				10. Election Campaign Fir	ancing	\$5.	00 May Be
Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 200 Make Check Payabl				Trust Fund Contribution			ed to Fees
11. OFFICERS AND DIRECTORS 12.					TIONS/CHANGES TO OFF	ICERS AND D	DIRECTO	
INTLE Vice President X Delete IN			I			. [Change	Addition
Refinant, Fichael D.			ET ADDRESS					
			ST-ZIP					
Vice President X Delete IIII						_	Change	
NAME Reinman, Daniel J. NASTREET ADDRESS 1120 North 70th Warren			ET ADDRESS		3000044951132 -07/25/0101028003			
OTV.CT.7ID . 1130 NORTH /UTN Terr.			ST-ZIP			1157119		·003 -50.00
Hollywood, FL	TITLE					Change	Addition	
NAME STREET ADDRESS	NAME	ET ADDRESS		a garage de la companya de la compa	· **		· . ·	
			ST-ZIP					
TITLE P V. Brice Reinman Delete IT						ĺ	Change	☐ Addition
NAME STREET ADDRESS 2421 NE 187th St.			ET ADDRESS					
			ST-ZIP					
TITLEST KathLeen F.	Reinmande	TITLE				[Change	Addition
NAME STREET ADDRESS 2421 NE 187+2 St.			ET ADDRESS					
	3180	CITY-	ST-ZIP					
NAME CON GERNAN Delete III						(Change	Addition
1//25-20			T ADDRESS					
CITY-ST-ZIP			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 V. Buga	The same of	٧.	BRICE RE		AN, 7/19/01	(305	1947	-5692
SIGNATURE: SIGNATURE AND TYPED OR PR	NTED NAME OF SIGNING OFFICER O	R DIRECTO			Date	<u> </u>	ime Phone #	
		_						

REINMAN, INC. 1923 N.E. 150 ST. MIAM, FL 83181-1115

FOR LILING PURPOSES

Anna Chestnut
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Anna,

I have been out of the office with operations & therapy, since last October. I cannot find where we ever received the Uniform Business Report or the late Notice you said was mailed out on July 2nd.

Therefore I am asking that you waive the \$400.00 late fee and accept the \$150.00 check for reregestration of our corporation.

Also enclosed is a Uniform Business Report 2001 form to change some of the officers of our company.

Thank you for your help in this matter.

Sincerely,

V. Brice Reinman

V. Breie Ja

President

O1 JUL 25 MINO 54
SEGRETARY OF STATE