

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 565958

1. Entity Name

CAROL M. BERNDT & ASSOCIATES, INC.

Principal Place of Business

195 S.W. 15TH RD.  
SUITE 303  
MIAMI FL 33129

Mailing Address

195 S.W. 15TH RD.  
SUITE 303  
MIAMI FL 33129

2. Principal Place of Business

1300 S.W. 22nd Street

Suite, Apt. #, etc.

Suite 206

City & State

Miami, FL

Zip

33145

Country

USA

3. Mailing Address

1300 S.W. 22nd Street

Suite, Apt. #, etc.

Suite 206

City & State

Miami, FL

Zip

33145

Country

USA

4. FEI Number 59-1797428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BERNDT, CAROL M.  
195 SW 15 RD STE 303  
MIAMI FL 33129

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

Carol M. Berndt, Registered Agent

(NOTE: Registered Agent signature required when reinstating)

1/06/01

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, 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

TITLE PD ☐ Delete  
NAME BERNDT, CAROL M.  
STREET ADDRESS 3731 S.W. 27TH ST.  
CITY-ST-ZIP MIAMI FL

TITLE STD ☒ Delete  
NAME BERNDT, CHARLES F., III  
STREET ADDRESS 3731 S.W. 27TH ST.  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carol M. Berndt, President

1/8/01

Date

(305)858-0232

Daytime Phone #

FILED

Jan 16, 2001 8:00 am  
Secretary of State

01-16-2001 90053 024 \*\*\*150.00

602127



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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