2002 UNIFORM BUSINESS REPORT (UBR)

REJECTED

DOCUMENT # 604752 1. Entity Name L. GABRIEL BACH, P.A.						FILED			
L. GADRI	EL BAOH, P.A.	i		(f)		12 AUG 13 AM	8: 27	
Principal Place of Business Mailing Address 2150 S.W. 13 AVENUE 2150 S.W. 13 AVENUE MIAMI FL 33145 MIAMI FL 33145					_ აგუ	SECRETARY OF MILHASSEE, FL	STATE ORIDA		
					·				
2. Principal Place of Business			3. Mailing Address			T TABULA BIRKI BERKE BIRKI TORBA BIRKE RIBKI BIRKI BIRKI Tabular birki berki birki torba birki			
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
-	City & State		City & State			4. FEI Number 59-1505782	. N	pplied For ot Applicable	
Zip	Countr	· <u> </u>	Zip	Country		5. Certificate of Status Desired	See Require		
6. Name and Address of Current Registered Agent				Name		7. Name and Address of New F	legistered Agent		
BACH, L G 2150 S.W. 13TH AVE.				Street /	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33145				City			E1 Zip Coo	40	
8. The above	this statement for th	e purpose of changing its re	'	or registere	ed agent, or both, in the State of Fig	FL			
the obligations of registered agent.									
	Signature, typed or printed nar	i		Registered Agent signs		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!!! After September 13, 2 Make Check Payable					be \$750.0			00 May Be d to Fees	
11.		OFFICERS AND DIF		12.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS	BACH, L G 2150 SOUTH WEST 13TH AVENUE			TITLE NAME STREET ADDRESS		£0000	Change 17003€	Addition Addition	
CITY-\$1-ZIP	T-ZIP MIAMI FL			CITY-ST-ZIP	ļ <u>.</u>	-08/1	6/0201056- 550.00 _{二 6編集} *	024 8	
TITLE NAME STREET ADDRESS			Delete	NAME STREET ADDRESS	<u></u> .	-	SSO. CO Change	· · · El-Aodhibh a	
CITY-ST-ZIP				CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP	Maria Baranda Baranda Baranda Baranda Baranda Baranda Baranda Baranda		☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME			☐ Delete	TITLE NAME			☐ Change	☐ Addition	
STREET ADDRESS City-St-Zip				STREET ADDRESS City-St-Zip					
TITLE NAME STREET ADDRESS		-	Delete .	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition	
CITY-ST-ZIP TITLE			Delete	CITY-ST-ZIP TITLE			☐ Change	☐ Addition	
CITY-ST-ZIP	ordify that the information	on supplied with this	Fling does not	NAME STREET ADDRESS CITY-ST-ZIP		Illon 119 07/3\(ii) Florida Statues I			

String of the computation information supplied with this litting does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes, I further certify that the information is 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 off or 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.