

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90047 013 ***150.00

DOCUMENT # 690317

1. Entity Name

BREKHUS ENTERPRISES, INC.

Principal Place of Business

Mailing Address

3985 MACFACHEN BLVD
#221
SARASOTA FL 34233
US

3985 MACFACHEN BLVD
#221
SARASOTA FL 34233
US

2. Principal Place of Business

3985 MacEachen Blvd.

Suite, Apt. #, etc.
#221

City & State

Zip

Country

3. Mailing Address

3985 MacEachen Blvd.

Suite, Apt. #, etc.
#221

City & State

Zip

Country

4. FEI Number 59-2095815

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BREKHUS, MICHAEL J.
4815 W COUNTRY CLUB DR
SARASOTA FL 34243

7. Name and Address of New Registered Agent

Name

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

3985 MacEachen Blvd. #221

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.

(NOTE: Registered Agent signature required 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!!! 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 P
NAME BREKHUS, MICHAEL J
STREET ADDRESS 4815 W COUNTRY CLUB DR
CITY-ST-ZIP SARASOTA FL

☐ Delete

TITLE ST
NAME BREKHUS, ARTHUR
STREET ADDRESS 3985 MACEACHEN BLVD #21
CITY-ST-ZIP SARASOTA FL 34233

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 3985 MacEachen Blvd. #221
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 3985 MacEachen Blvd. #221
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Michael J. Brekhus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-2001 941-921-480

Date

Daytime Phone #

CR2E034 (10/00)