

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91362 038 \*\*\*150.00

**DOCUMENT # 696016**

1. Entity Name

**BRENT E. BERESH, P.A.**

Principal Place of Business

**5032 N LA SEDONA CIRCLE  
DELRAY BEACH FL 33484**

Mailing Address

**5032 N LA SEDONA CIRCLE  
DELRAY BEACH FL 33484**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

**59-2107866**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BERESH, BRENT E.  
5032 N LA SEDONA CIRCLE  
DELRAY BEACH FL 33484**

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.

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSTD  
BERESH, BRENT E  
5032 N LA SEDONA CIRCLE  
DELRAY BEACH FL 33484** ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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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

Date

Daytime Phone #

**1/9/01 561 638-0460**

CR2E034 (10/00)

Attachment  
# 696016  
767862  
BRENT E. BEARESH, P.A.

5/07/01

DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P.O. Box 1500  
TALLAHASSEE, FL 32302-1500

RE: ANNUAL REPORT

DEAR SIRS,

THE ENCLOSED REPORT WAS COMPLETED  
& READY TO MAIL ON 1/08/01.  
I INADVERTENTLY LEFT IT IN MY  
BRIEF CASE WHEN TAKING IT TO  
THE POST OFFICE TO MAIL. I BELIEVED  
IT WAS INCLUDED WITH MY OTHER  
OUTGOING MAIL. I JUST NOW  
DISCOVERED IT IN MY BRIEFCASE.

I RESPECTFULLY REQUEST ABATEMENT  
OF THE LATE FILING PENALTY. I  
HAVE BEEN INCORPORATED SINCE 1981  
AND ALL PREVIOUS REPORTS HAVE  
BEEN FILED ON A TIMELY BASIS. ALL  
FUTURE REPORTS WILL BE TIMELY. THANK-YOU  
FOR YOUR CONSIDERATION.

Brent E. Bearesh, Pres