

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90132 032 ***150.00

DOCUMENT # F01000003353

1. Entity Name

BRADFORD SERVICES GROUP, INC.

Principal Place of Business

**955 JUNIPER STREET, N.E.
 ATLANTA GA 30309**

Mailing Address

**955 JUNIPER STREET, N.E.
 ATLANTA GA 30309**

B0130120



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

410 JERICHO Tpke

Suite, Apt. #, etc.

Suite, Apt. #, etc.

200

City & State

City & State

JERICHO NY

Zip

Country

Zip

Country

11753

USA

4. FEI Number

58-2541502

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

BIANCO, BARBARA W

345 BAYSHORE BLVD.

TAMPA FL 33606

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
PD
BIANCO, BARBARA W
955 JUNIPER STREET, N.E.
ATLANTA GA 30309

☐ Delete

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP

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CR2E034 (4/02)

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/02

Date

516 681-5300

Daytime Phone #

Attachment
Doc. # F01000003353
B0130120

**BRADFORD SERVICES GROUP
410 JERICO TURNPIKE SUITE 200
JERICO, NEW YORK 11753**

516 681-5300

FAX 516 939-2482

July 5, 2002

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: 58-2541502
2002 Uniform Business Report

To Whom It May Concern:

Please waive the late fee, as this is the first notice we received for this report.

Sincerely,



Barbara Bianco
President

Enclosures:

BB:cs