

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 28, 2003 8:00 am
Secretary of State

02-28-2003 90132 010 ***150.00

DOCUMENT # F93000000864

1. Entity Name
BENSON ENTERPRISES LTD. COMPANY



Principal Place of Business
153 SEVILLA AVENUE
CORAL GABLES FL 33134

Mailing Address
P.O. BOX 140668
CORAL GABLES FL 33114-0668
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

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

MJF REGISTERED AGENT CORP
153 SEVILLA AVE
CORAL GABLES FL 33134

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **MANSFIELD, ABDIEL**
STREET ADDRESS **AVENIDA FEDERICO BOYD, NO. 33**
CITY-ST-ZIP **PANAMA 1, DE PANAMA**

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

TITLE **S** ☐ Delete
NAME **LEDEZMA, HERIBERTO**
STREET ADDRESS **AVENIDA FEDERICO BOYD 33**
CITY-ST-ZIP **PANAMA 1, DE PANAMA**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ABDIEL MANSFIELD, DIRECTOR

2-25-03

(305) 442-1567

Date

Daytime Phone #

CR2E034 (10/02)

Attachment # 9300000864

7002271

Law Offices

MICHAEL J. FREEMAN, P.A.

153 Sevilla Avenue

Coral Gables, Florida 33134-6006

Reply to:
P.O. Box 140668
Coral Gables, Florida 33114-0668

Tel: (305) 442-1567
Fax: (305) 442-1227

February 25, 2003

Secretary of State
Division of Corporations
Uniform Business Report Filing
P.O. Box #1500
Tallahassee, Florida 32302-1500

Re: **BENSON ENTERPRISES LTD. COMPANY**
Document #P9300000864 (4)

Gentlemen:

Enclosed please find the following document for the above referenced corporation:

1. Executed 2003 Uniform Business Report
2. My office check #13616 in the amount of \$150.00 representing the filing fee.

Thank you for your courtesies in this matter.

Very truly yours,



MICHAEL J. FREEMAN

MJF:lc
enc.