

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000003144

1. Entity Name

MEDVENTURE, INC.

**FILED**  
**Apr 03, 2001 8:00 am**  
**Secretary of State**

04-03-2001 90068 002 \*\*\*150.00

0692800

Principal Place of Business  
10680 TEENA ST  
5TH FLOOR  
SAN DIEGO CA 92131  
US

Mailing Address  
10680 TREENA ST  
5TH FLOOR  
SAN DIEGO CA 92131  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **33-0701957**

Applied For  
Not Applicable

Zip Country

Zip Country

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

LEWIS, ROBERT E  
%ECKARD CORPORATION  
8333 BRYAN DAIRY RD  
LARGO FL 34647

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 \_\_\_\_\_ (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 DCVS  
NAME HOWE, FREDERICK  
STREET ADDRESS 10660 SCRIPPS RANCH BLVD #100  
CITY-ST-ZIP SAN DIEGO CA 92131 ☐ Delete

TITLE D/C/V/S  
NAME Howe, Frederick  
STREET ADDRESS 10680 Treena St., 5th Floor  
CITY-ST-ZIP San Diego, CA 92131 ☒ Change ☐ Addition

TITLE T  
NAME HOWE, FREDERICK  
STREET ADDRESS 10660 SCRIPPS RANCH BLVD #100  
CITY-ST-ZIP SAN DIEGO CA 92131 ☐ Delete

TITLE T  
NAME Howe, Frederick  
STREET ADDRESS 10680 Treena St., 5th Floor  
CITY-ST-ZIP San Diego, CA 92131 ☒ Change ☐ Addition

TITLE DP  
NAME WELLS, LUNDA L  
STREET ADDRESS 10660 SCRIPPS RANCH BLVD #100  
CITY-ST-ZIP SAN DIEGO CA 92131 ☐ Delete

TITLE D/P  
NAME Wells, Linda L.  
STREET ADDRESS 10680 Treena St., 5th Floor  
CITY-ST-ZIP San Diego, CA 92131 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/2001

Date

408-559-7345

Daytime Phone #

CR2E034 (10/00)