

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G31468

FILED  
Apr 11, 2002 8:00 AM  
Secretary of State

**Entity Name:** BRETT D. ANDERSON, P.A.

## Current Principal Place of Business:

100 SE 2ND ST  
SUITE 3920  
MIAMI, FL 33139105

## New Principal Place of Business:

370 MINORCA AVENUE  
SUITE 5  
CORAL GABLES, FL 33134 US

## Current Mailing Address:

100 SE 2ND ST  
SUITE 3920  
MIAMI, FL 33139105

## New Mailing Address:

370 MINORCA AVENUE  
SUITE 5  
CORAL GABLES, FL 33134 US

**FEI Number:** 59-2402646

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## Name and Address of Current Registered Agent:

BRETT D ANDERSON  
14541 S.W. 64TH AVENUE  
MIAMI, FL 33158 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ANDERSON, BRETT D,  
Address: 100 SE 2ND ST #3920  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ANDERSON, BRETT D,  
Address: 370 MINORCA AVENUE, SUITE 5  
City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRETT D. ANDERSON

PD

04/11/2002

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date