

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2002 8:00 am
Secretary of State
 03-18-2002 90011 005 ***150.00

DOCUMENT # G67457

1. Entity Name

DANDAR & DANDAR, A PROFESSIONAL ASSOCIATION

Principal Place of Business

~~5340 W KENNEDY BLVD~~

~~#201~~

~~TAMPA FL 33609~~

US

Mailing Address

POST OFFICE BOX 24597

TAMPA FL 33623-1597

2. Principal Place of Business

1715 N. Westshore Blvd.,

Suite, Apt. #, etc.

750

City & State

Tampa, FL

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip
33607

Country
USA

Zip

Country

4. FEI Number

59-2337825

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DANDAR, KENNAN GEORGE

~~5340 W KENNEDY BLVD~~

~~#201~~

~~TAMPA FL 33609~~

1715 N. Westshore Blvd.

Suite 750

Tampa, FL 33607

7. Name and Address of New Registered Agent

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, 2002 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

TITLE **PTD** ☐ Delete
 NAME **DANDAR, KENNAN GEORGE**
 STREET ADDRESS ~~5340 W KENNEDY BLVD #201~~
 CITY-ST-ZIP ~~TAMPA FL 33609~~

TITLE **VSD** ☐ Delete
 NAME **DANDAR, THOMAS JOHN**
 STREET ADDRESS ~~5340 W KENNEDY BLVD #201~~
 CITY-ST-ZIP ~~TAMPA FL 33609~~

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **1715 N. Westshore Blvd, #750**
 CITY-ST-ZIP **Tampa, FL 33607**

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS **1715 N. Westshore Blvd., #750**
 CITY-ST-ZIP **Tampa, FL 33607**

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

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

Pres.

813-289-3858

Date

Daytime Phone #

CR2E034 (9/01)