

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K10634

1. Entity Name

SAMEH L. ATALLA, M.D. P.A.

FILED
Sep 06, 2000 8:00 am
Secretary of State

09-06-2000 90097 016 ***150.00

Principal Place of Business

C/O SAMEH L. ATALLA
250 2ND ST E STE 4D
BRADENTON FL 34208
US

Mailing Address

250 2ND ST E
BRADENTON FL 34208
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

65-0044878

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

ATALLA, SAMEH L.
250 2ND STREET E
SUITE 4D
BRADENTON FL 34208

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 \$550.00
After SEPTEMBER 13, 2000 Min. 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
D
ATALLA, SAMEH L.
250 2ND ST E STE 4D
BRADENTON FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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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:

SAMEH L. ATALLA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/10/00

CR2E034 (5/00)

Attachment doc #
B 10634
00083885

Sameh L Atalla, M.D., PA
250 2nd St E, Ste 4D
Bradenton, FL 34208

August 9, 2000

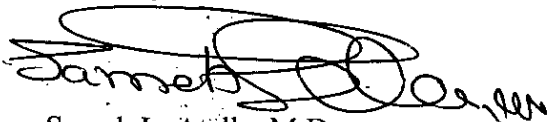
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2000 Uniform Business Report (UBR)

Dear Sir or Madam:

Enclosed is the 2000 UBR for this corporation and the annual filing fee of \$150. I did not receive the annual report's first notice. Therefore, I am respectfully requesting that the late filing fee of \$400 be waived.

Sincerely,



Sameh L. Atalla, M.D.
President