

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 11, 2002 8:00 am
Secretary of State

06-11-2002 90150 002 ***150.00

DOCUMENT # M02621

1. Entity Name

CHARLES L. ILVENTO P.A.

Principal Place of Business

**10205 COLLINS AVE
STE 1206
BAL HARBOUR FL 33154-1429
US**

Mailing Address

**10205 COLLINS AVE
STE 1206
BAL HARBOUR FL 33154-1429
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2426891

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

**ILVENTO, CHARLES L.
10205 COLLINS AVE
STE 1206
BAL HARBOUR FL 33154-1429**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD ILVENTO, CHARLES L. 10205 COLLINS AVE, STE 1206 BAL HARBOUR FL 33154-1429			
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

Date

Daytime Phone #

4/27/02 305 944 1120

CR2E034 (9/01)

Attachment MO2621
FROM CHARLES L. ILVENTO 117549
#59-2426891
PAGE 10F3

6/6/02

Gentlemen:

Enclosed is my UBR for
#59-2426891 Charles L. Ilvento, P.A.

This report was to be mailed Tuesday
April 30, 2002, but due to a serious
medical condition was thought to be
filed, but was inadvertently not.

I am going in the hospital for
heart surgery. During the past 6 months
from November 2001, I have suffered
severe memory loss and lack of
oxygen. I have been to at least
4 different doctors and 2 cardiologists

Attachment
Doc# M02621
CHARLES L. ILVENTO, D.A. 11 7549
59-2426891
PAGE 2 OF 3

doctor as consultants. Finally on
my insistence a second
stress test showed the heart
was not properly supplying enough
blood and oxygen to my system.

These facts can be verified with my
main doctors, Dr. LOMAS, TURKEN,
Dr. CHEDIOR, Dr. Stein all of whom I
consulted with.

The memory loss has been a major
concern, as I have gone to the
wrong classroom & appointments missed.

Due to these mitigating circumstances,
I am requesting that you accept

CHARLES L. ILVENTO PA

59-2426891

PAGE 313

Attachment

+ Doc # M02621

117549

my UBR as timely filed due to my
serious medical condition. I will
be pleased to provide you with sworn
affidavits should you need further
documentation.

Sincerely yours,

Charles L. Ilvento, Pres.

CHARLES L. ILVENTO PA

10205 COLLINS AV #1206

BAL HARBOR FL 33154-1429

FL # M02621