2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 07, 2001 8:00 am Secretary of State

03-07-2001 90607 005 ***150.00

DOCUMENT # M68413 1. Entity Name TED BEHRMAN, INCORPORATED Principal Place of Business Mailing Address 3608 INDUSTRIAL WAY PO BOX 1180 RIVIERA BEACH FL 33404 RIVIEBA BEACH FL 33419

2. Principal 79 28 Suite, Apt	116100 0010	3. Mailing Address 928 Suite, Apt. #, etc.	TEC COU	125	DO NOT WRITE	IN THIS SP	ACE		
LAKE	WORTH, FL	LAKE WORTH	4, FL	4.	FEI Number 65-0025585		⊢ + ·	oplied For	
25765			Country	5. Certificate of Status Desired \$8.75 Additional Fee Required					
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
BEHRMAN, TED 3608 INDUSTRIAL WAY 7928 AZTEC COUNT RIMERA REACH EI 33404				Street Address (P.O. Box Number is Not Acceptable)					
	LAKE	33463	City			FL	Zip Cod	е	
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_byped ox 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 After MAY 1, 2001 Fee Make Check Payable to De					10. Election Campaign Finar Trust Fund Contribution.	ncing		May Be I to Fees	
11.	OFFICERS AND D		12.	ĀĒ	DDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTORS	3 IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	DP BEHRMAN, TED 3008 INDUSTRIAL WAY SEL A RIVIERA BEACH FL 83404	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7928 LAKE	AZTEC COURT WONTH, The 37		2 Change	☐ Addition	
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13. I hereby certify that the information supplied with this filling 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.

TITLE

NAME ...

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Addition