

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 31, 2002 8:00 am**  
**Secretary of State**

07-31-2002 90092 007 \*\*\*550.00

**DOCUMENT # P00000008299**

1. Entity Name  
**BRET BUCKSTEIN, INC.**

Principal Place of Business

6980 ULMERTON ROAD  
 5-H  
 LARGO FL 33771

Mailing Address

6980 ULMERTON ROAD  
 5-H  
 LARGO FL 33771

2. Principal Place of Business

**7169 ULMERTON ROAD**

Suite, Apt. #, etc.

3. Mailing Address

**7169 ULMERTON ROAD**

Suite, Apt. #, etc.

City & State

**LARGO, FLORIDA**

City & State

**LARGO, FLORIDA**

Zip

**33771**

Country

**USA**

Zip

**33771**

Country

**USA**

4. FEI Number

**59-3619025**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BUCKSTEIN, BRET**  
**6980 ULMERTON ROAD**  
**5-H**  
**LARGO FL 33771**

7. Name and Address of New Registered Agent

Name

**BRET BUCKSTEIN**

Street Address (P.O. Box Number is Not Acceptable)

**13917 MARGO AVENUE**

City

**HUDSON**

FL

Zip Code

**34667**

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. I am familiar with, and accept the obligations of registered agent.

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, 2002 Fee 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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PSTD**  
**BUCKSTEIN, BRET A**  
**6980 ULMERTON ROAD UNIT 5H**  
**LARGO FL 33771**

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**PSTD**  
**BUCKSTEIN, BRET A.**  
**13917 MARGO AVENUE**  
**HUDSON, FL 34667**

☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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☐ Delete

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 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:

**BRET A. BUCKSTEIN, PRESIDENT**

**7126102 727 538-5225**

CR2E034 (4/02)