

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000034676

1. Entity Name

VIA PALMA DELRAY, INC. ✓

Principal Place of Business

Mailing Address

2070 NE 63rd ST
FT. LAUD, FL.

2. Principal Place of Business

7099 E. TROPICAL WAY

3. Mailing Address

7099 E. TROPICAL WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PLANTATION, FL.

City & State

PLANTATION, FL

Zip

33317

Country

USA

Zip

33317

Country

USA

4. FEI Number

650996754

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

BEESON, JAMES B
2070 NE 63rd ST
FT. LAUD, FL

Name BEESON, JR. J. M.

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

7099 E. TROPICAL WAY

City PLANTATION

FL

Zip Code

33317

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

J. M. Beeson, Jr.

J. M. BEESON, JR

27 APR 01

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, 2001 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	DIRECTOR	☒ Delete
NAME	BEESON, JAMES B.	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.

TITLE	DIRECTOR	☒ Change ☒ Addition
NAME	J. M. BEESON, JR	
STREET ADDRESS	7099 E. TROPICAL WAY	
CITY-ST-ZIP	PLANTATION, FL 33317	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

J. M. Beeson, Jr.

J. M. BEESON, JR

27 Apr 01

954-763-4888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

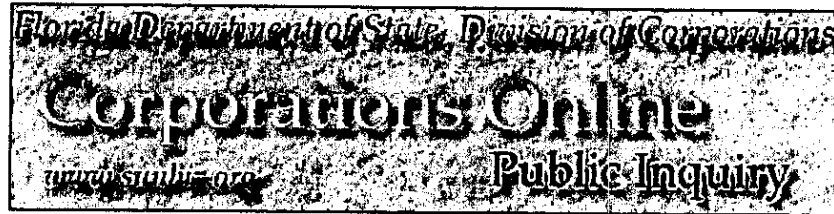
Daytime Phone #

00056449

DO NOT WRITE IN THIS SPACE

CR2E034 (1/1/00)

Attachment
#P00000034676
D0056449



Florida Profit

VIA PALMA DELRAY, INC.

PRINCIPAL ADDRESS
 2070 N.E. 63 STREET
 FORT LAUDERDALE FL

MAILING ADDRESS
 2070 N.E. 63 STREET
 FORT LAUDERDALE FL

Document Number
 P00000034676

FEI Number
 NONE

Date Filed
 04/05/2000

State
 FL

Status
 ACTIVE

Effective Date
 NONE

Registered Agent

Name & Address
BEESON, JAMES B 2070 N.E. 63 STREET FORT LAUDERDALE FL

Officer/Director Detail

Name & Address	Title
BEESON, JAMES B 2070 N.E. 63 STREET FORT LAUDERDALE FL	D

Annual Reports

Report Year	Filed Date	Intangible Tax
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