2002 UNIFORM BUSINESS REPORT (UBR)

FILED Jul 23, 2002 8:00 am **DOCUMENT #** P00000051307 Secrétary of State 1. Entity Name 07-23-2002 90338 031 ***150.00 BEZMEN AND ASSOCIATES, INC. Principal Place of Business Mailing Address 6680-1 COLUMBIA PARK DR. SOUTH 6680-1 COLUMBIA PARK DR. SOUTH JACKSONVILLE FL 32258 JACKSONVILLE FL 32258 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3657939 -Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name WILBER, CARL Street Address (P.O. Box Number is Not Acceptable) 6680-1 COLUMBIA PARK DR. SOUTH JACKSONVILLE FL 32258 City 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. 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME BEZMEN, WAYNE J NAME 6680-1 COLUMBIA PARK DR. SOUTH STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32258 CITY-\$T-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIE Change ☐ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE

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 an address, with all other like empowered changed, or on an attachment

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

XC NEWUIRED RINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment





BEZMEN AND ASSOCIATES

539 Camellia Terrace Drive, Neptune Beach, Fl. 32266

OFFICE (904) 886-4777

MOBILE (904) 571-3049

FAX (904) 242-7181

To Whom It May Concern:

7-11-02

Re: Document P00000051307-

This corporation did not receive the prior notice for the completion of the UBR report. After calling the number provided, I was instructed to write this letter stating that fact. And include a check for the standard fee of \$150.00.

Thank you for your consideration.

Sincerely,

Wayne Bezmen

President