## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND PROPERTY OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Jan 21, 2002 8:00 am Secretary of State **DOCUMENT #** P00000085791 1. Entity Name H & T BENAZET, M.D., P.A. 01-21-2002 90059 019 \*\*\*158.75 Principal Place of Business Mailing Address 7235 CORAL WAY - SUITE #201 7235 CORAL WAY - SUITE #201 MIAM! FL 33155 MIAMI FL 33155 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEł Number - 65-1038468 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BENAZET. HUGO E. BENAZET, HUGO E Street Address (P.O. Box Number is Not Acceptable) 11326 SW 75TH TERRACE 22 NW 136Th AUE. MIAMI FL 33173' -MIAMI 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD BENAZET, HUGO E Change Addition (AMDRESS) ZZNW 136 AUR. MIAMI, FL 33182 CR2E034 (9/01) TITLE □.Delete\_ TITLE BENAZET, HUGO E NAME NAME 11326 SW 75TH TERRACE STREET ADDRESS STREET ADDRESS **MIAMI FL 33173** CITY-ST-7IP CITY-ST-ZIP BENAZET, TULIA R. Change Addition (address) ☐ Delete TITLE BENAZET, TULIA R NAME 11326 SW 75TH TERRACE STREET ADDRESS STREET ADDRESS Miami, FL. 33182 CITY-ST-ZIP **MIAMI FK 33173** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE" - Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 vustee 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.

**FILED**