

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 19, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000091650**1. Entity Name
PAMELA EBMEIER MONTMENY, O.D., P.A.Principal Place of Business
2157 NE 63RD ST
FT LAUDERDALE FL 33308
Mailing Address
2157 NE 63RD ST
FT LAUDERDALE FL 333082. Principal Place of Business
2641 E. OAKLAND PARK BLVD
3. Mailing AddressSuite, Apt. #, etc.
SUITE #3
Suite, Apt. #, etc.City & State
FT LAUDERDALE FL
City & StateZip
33306
Country
Zip
Country4. FEI Number
65-1043992
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentGROSS WILLIAM JESQ
C/O TRIPP SCOTT, P.A.
110 SE 6TH ST, 15TH FLOOR
FT LAUDERDALE FL 33301 US**7. Name and Address of New Registered Agent**Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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.

SIGNATURE _____ **01/19/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
	D	EBMEIER MONTMENY PAMELA	OD	☐ Delete
		2157 NE 63RD ST		
		FT LAUDERDALE	FL 33308	
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☒ Addition
V	MONTMENY CHRISTOPHER D	2157 NE 63RD ST	FT LAUDERDALE FL 33308		
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ 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: CHRISTOPHER D MONTMENY

V

01/19/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)