

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90470 021 ***150.00

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1. Entity Name
DAVIDSON A. BARLETT, P.A.



Principal Place of Business
7500 SW 59TH AVENUE
APT C-3
SOUTH MIAMI FL 33143-5237

Mailing Address
7500 SW 59TH AVENUE
APT C-3
SOUTH MIAMI FL 33143-5237



2. Principal Place of Business

3. Mailing Address

5880 SW 74th Terrace

5880 SW 74th Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Apt 6-D

Apt 6-D

City & State

City & State

South Miami

South Miami

Zip

Country

FL 33143-5249

Zip

Country

FL 33143-5249

4. FEI Number 62-1837355

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARTLETT, DAVIDSON A
7500 SW 59TH AVENUE, APT C-3
MIAMI FL 33143-5237

Name

Barlett, Davidson A

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

5880 SW 74th Terrace Apt 6-D

City

South Miami

FL

Zip Code

33143-5249

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

Davidson A Barlett

10 March 2003

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME BARLETT, DAVIDSON A
STREET ADDRESS 7500 SW 59TH AVENUE, APT C-3
CITY-ST-ZIP MIAMI FL 33143-5237

TITLE D
NAME BARLETT, DAVIDSON A
STREET ADDRESS 5880 SW 74th Terrace Apt 6-D
CITY-ST-ZIP South Miami FL 33143-5249

TITLE
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Davidson A Barlett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)