

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90071 013 ***150.00

DOCUMENT # **PO100000811610**

1. Entity Name

DAVENPORT Consulting INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

240 Crandon Blvd.

Suite, Apt. #, etc.

Suite 207

3. Mailing Address

240 Crandon Blvd.

Suite, Apt. #, etc.

Suite 207

DO NOT WRITE IN THIS SPACE

City & State

KEY BISCAYNE, FL.

City & State

KEY BISCAYNE, FL.

4. FEI Number

65-1130138

Applied For

Not Applicable

Zip

33149

Country

USA

Zip

33149

Country

USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

MARTIN MELHEM

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

240 Crandon Blvd.

Suite 207

City

KEY BISCAYNE

FL

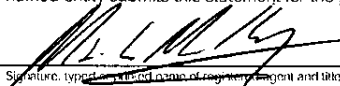
Zip Code

33149

**DO NOT WRITE
IN THIS SPACE**

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



MARTIN MELHEM

PRESIDENT

3/25/02

(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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT

MARTIN MELHEM

240 Crandon Blvd. # 207

KEY BISCAYNE, FL. 33149

TITLE
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CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:



MARTIN MELHEM

3/25/02

(305) 361-3880

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone

CR2E034B (12/01)