

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State

03-12-2002 90284 014 ***150.00

0367658 AV

DOCUMENT # P93000010358

1. Entity Name
BOMZE & BOMZE, INC.

Principal Place of Business
5520 GODFREY ROAD
CORAL SPRINGS FL 33067

Mailing Address
5520 GODFREY ROAD
CORAL SPRINGS FL 33067



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21798 CARTAGENA DR

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON FL

City & State

BOCA RATON FL

4. FEI Number **65-0396894**

Applied For

Not Applicable

Zip **33428**

Country

FLORIDA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOMZE, HOWARD J
5520 GODFREY ROAD
CORAL SPRINGS FL 33067

7. Name and Address of New Registered Agent

Name **WENDY LEE BOMZE**
Street Address (P.O. Box Number is Not Acceptable) **21798 CARTAGENA DR**
City **BOCA RATON** **FL** **Zip Code** **33428**

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 **WENDY LEE BOMZE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/14/02

DATE

9. 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, 2002 Fee will be \$550.00
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 **P** ☒ **Delete**
NAME **BOMZE, HOWARD J**
STREET ADDRESS **5520 GODFREY ROAD**
CITY-ST-ZIP **CORAL SPRINGS FL 33067**

TITLE **TS** ☒ **Delete**
NAME **BOMZE, WENDY L**
STREET ADDRESS **5520 GODFREY ROAD**
CITY-ST-ZIP **CORAL SPRINGS FL 33067**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/T** ☐ **Change** ☐ **Addition**
NAME **WENDY LEE BOMZE**
STREET ADDRESS **21798 CARTAGENA DR**
CITY-ST-ZIP **BOCA RATON, FL 33428**

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
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TITLE ☐ **Change** ☐ **Addition**
NAME
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CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

1/14/02 **(561) 218.5754**

CR2E034 (9/01)