

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000018597

1. Entity Name

MILBAR MEDICAL COMPANY, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90100 019 ***150.00

Principal Place of Business

Mailing Address

16244 S MILITARY TR
#170
DELRAY BEACH FL 33484
US

16244 S MILITARY TR
#170
DELRAY BEACH FL 33484-6532
US

Change of

2. Principal Place of Business

5258 Linton Blvd
Suite, Apt. #, etc. #103

3. Mailing Address

5258 Linton Blvd
Suite, Apt. #, etc. #103



DO NOT WRITE IN THIS SPACE

City & State

Delray Beach, FL

City & State

Delray Bch / FL

4. FEI Number

65-0425303

Applied For

Not Applicable

Zip

33445

Country

3 USA

Zip

33445

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORLEY, WILLIAM E III
CALDWELL <7 PACETTI
324 ROYAL PALM WAY, SUITE 300
PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name Jeffrey S. Braun, MD

Street Address (P.O. Box Number is Not Acceptable) 5258 Linton Blvd #103

City Delray Bch

FL

Zip Code 33484

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/21/00

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, 2000 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 D
NAME BRAUN, JEFFREY
STREET ADDRESS 16244 S MILITARY TR #170
CITY-ST-ZIP DELRAY BEACH FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME Braun, Jeffrey
STREET ADDRESS 5258 Linton Blvd #103
CITY-ST-ZIP Delray Bch, FL 33484

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/21/00

561 4985530