2001 UNIFORM BUSINESS REPORT (UBR) FILED 01 SEP 25 PM 4: 17 Principal Place of Business Mailing Address SECRETARY OF STATE TALLAHASSEE. FLORIDA 1509 N State Rd #7 Margate Fl. 33063 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Joseph M. Chasko -Street Address (P.O-Box Number is Not Acceptable) - -N. State Rd #7 Margat (IFI. 33063 Zip Code City 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 Joseph M. Chasko (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE fre sident TITLE Delete eak M. Chasto NAME NAME -10/02/01--01020--019 1509 N. State RJ+7 STREET ADDRESS STREET AODRESS \*\*\*\*150.00 \*\*\*\*150.00 CITY-ST-ZIP CITY-ST-ZIP 33063 TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition ☐ Delete Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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. 9/17/01 954 974 - 8550
Thate Daytime Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

JOSEPH M. CHASKO, D.M.D., P.A. 1509 N. STATE ROAD 7 MARGATE, FL 33063 954-974-8550

August 7, 2001

DEPARTMENT OF STATE DIVISIONS OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314

SUBJECT: 2001 UNIFORM BUSINESS REPORT

Dear Sir or Madam:

I received the 2001 Uniform Business Report due September 12, 2001. Please be informed that on April 13, 2001 I issued and mailed a check #3731 to Division of Corporations in the amount of \$150.00 together with the Uniform Business Report.

The check nor the UBR document # P93000052679 never came back to me. It is obvious that your office received it. I have included check stubs #3728 dated April 4. 2001 through check stub # 3736 dated April 22, 2001, note that check stub #3731 dated April 13, 2001 issued to Divisions of Corporation. This proves that I did write the check and I did mail the check and UBR on time. I never received any notice from the Dept. of State.

I respectfully, request that you take this check #3839 dated July 30, 2001 as payment for the UBR due June 8, 2001. It is obvious that the first check and UBR was misplaced by your office.

I am a doctor and I run my business with great care. I have never been late as you can see by my record. This is an unfortunate event and I thank you in advance for resolving this matter.

Respectfully,

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Dr. Joseph M. Chasko