

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90128 011 ***158.75

0045206 AV

DOCUMENT # P93000054097

1. Entity Name

8808 CORPORATION

(LP)

Principal Place of Business

**155 OCEAN LANE DR
 KEY BISCAYNE FL 33149**

Mailing Address

**% MAGGS - CCW 913
 155 OCEAN LN DR
 KEY BISCAYNE FL 33149
 US**

00072890



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0432037

Applied For

☒ Not Applicable

5. Certificate of Status

YES X
\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ROBERTS, NORMAN T
 50 W MASHTA DR
 SUITE 2
 KEY BISCAYNE FL 33149**

7. Name and Address of New Registered Agent

Name **MAGGS @ CCW 913**
 Street Address (P.O. Box Number is Not Acceptable) **155 OCEAN LANE DRIVE**
 City **CCW 913**
 City **KEY BISCAYNE FL 33149**

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 **ROBERT L. MAGGS** **Robert L. Maggs MD** **7/3/01**
 Signature, typed or printed name of registered agent (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) ☐

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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 **PD** ☐ Delete
 NAME **MAGGS, MARGUERITE**
 STREET ADDRESS **155 OCEAN LN DR, CCW 913**
 CITY-ST-ZIP **KEY BISCAYNE FL**

TITLE **STD** ☐ Delete
 NAME **MAGGS, ROBERT**
 STREET ADDRESS **155 OCEAN LN DR, CCW 913**
 CITY-ST-ZIP **KEY BISCAYNE FL**

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

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

TITLE ☐ Change ☐ Addition
 NAME
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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: **S/Robert L. Maggs**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/01
 Date

305-361-8808
 Daytime Phone #

CR2E034 (5/01)

Attachment
Doc # 19 300054097
C0072890

ROBERT L. MAGGS, M.D. / 8808 CORPORATION

155 OCEAN LANE DRIVE
COMMODORE CLUB WEST - 913
KEY BISCAIYNE, FL 33149

TELEPHONE 305-361-8808

FAX *305-361-8808

E-MAIL: bobilbaby@aol.com

July 3, 2001

Florida Dept. of State
Division of Corporations
C/o Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir:

Request for filing the 2001 Uniform Business Report was not received until June 28, 2001.

The 8808 Corporation is registered for the 2001 year with the State of Florida, Department of Banking and Finance (#200878, #200879).

Current Registered Agent is incorrect. Please note the change, and change your records as was requested previously.

A check for \$158.75 is attached to the UBR form as directed by your agent by telephone on 7/3/01

Thank you.



Robert L. Maggs, M.D.