2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

SIGNATURE:

P95000064397

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FILED Jun 20, 2002 8:00 am Secretary of State

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B & M UNITED, INC. Principal Place of Business Mailing Address 4619 LONGBOW DRIVE 4619 LONGBOW DRIVE TITUSVILLE FL 32796 TITUSVILLE FL 32796 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 59-3330662 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PATEL BIPIN A Street Address (P.O. Box Number is Not Acceptable) **4619 LONGBOW DRIVE** TITUSVILLE FL 32796 City Zip Code 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 region (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After May 1, 2002 Fee will be \$550,00 \$5.00 May Be (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PSTD** ☐ Delete TITLE ☐ Addition NAME PATEL, BIPIN A NAME STREET ADDRESS **4819 LONGBOW DRIVE** STREET ACCRESS CITY-ST-ZIP TITUSVILLE FL 32796 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deleta TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE - Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete MLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS 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 earl; that I am an officer or director of the opportance 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



Attachment 870145

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

May 15, 2002

B & M UNITED, INC. 4619 LONGBOW DRIVE TITUSVILLE, FL 32796

Subject: B & M UNITED, INC.

Reference Number:

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Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please note the money amounts differ on the check. The numeric and written amounts must be the same. Please send a corrected check for the proper amount.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

*If-you-have additional-questions or need further assistance, please call-the Division of Corporations at (850) 488-9000.

/mp ANNUAL REPORTS SECTION