2001 UNIFORM BUSINESS REPORT (UBR)  DOCUMENT # P95000078016  BENEWAY, INC.					FILED Jan 12, 2001 8:00 am Secretary of State 01-12-2001 90043 047 ***150.00			
Principal Place of Business 1865 OVERSEAS HIGHWAY MARATHON FL 33050		Mailing Address 1865 OVERSEAS HIGHWAY MARATHON FL 33050		-	To the fee leasters of a	601	307	7 11 <b>1</b> 141 (111)
2. Principal Place of Business		3. Mailing Address		-				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- I - I>	·· , · ; DO NOT WRITE	IN THIS SPAC	CE	
City & State		City & State		4. F	El Number <b>65-0621055</b>		Applied For Not Applicable	
Zip Country		Zip Country		<b>5</b> . C	Certificate of Status Desired		75 Addi	itional
		Registered Agent	Name	7. N	ame and Address of New Rec	istered Agen	nt	
	ACE, GERALD P LAKE EMERALD DR.		s (P.O. B	ox Number is Not Acceptable)		<u>.,</u>		
#407	7							
FT. L	AUDERDALE FL 33309		City			FL	Zip Code	,
8. The above	named entity submits this statement for	or the purpose of changing its	registered office or regis	tered age	ent, or both, in the State of Flori	da.	· <del>····</del>	
SIGNATURE .	Signature, typed or printed name of registered agent praction is eligible to satisfy its Intangible		E: Registered Agent signature requ	red when rei	<del></del>	DATE		
Tax filling requirement and elects to do so. (See criteria on back)		After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			<ol> <li>Election Campaign Finar Trust Fund Contribution.</li> </ol>			May Be to Fees
11.	OFFICERS AND		12.	ADI	DITIONS/CHANGES TO OFFIC			IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENEWAY, CHARLES 1865 OVERSEAS HIGHWAY MARATHON FL 33050	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			ں	Change	Addition
TITLE NAME STREET ADDRESS	111111111111111111111111111111111111111	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>			Change	Addition
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	<u> </u>	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u>,</u>		Change	Addition
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indicated of the cor changed,	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor on an attachmen with an address,			e same i i07, Florid	egal effect as it made under oa da Statutes; and that my name i			

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