

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90281 014 ***150.00

00055676

DO NOT WRITE IN THIS SPACE

DOCUMENT # P960000 24663 (2)

1. Entity Name

BSP, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

1401 Brickell Avenue

Suite, Apt. #, etc.

Suite 520

City & State

Miami FL

Zip

33131

Country

USA

3. Mailing Address

1401 Brickell Avenue

Suite, Apt. #, etc.

Suite 520

City & State

Miami FL

Zip

33131

Country

USA

4. FEI Number

65-0656271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

David Marguette

Street Address (P.O. Box Number is Not Acceptable)

1401 Brickell Avenue

Suite 520

City

Miami

FL

Zip Code

33131

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

David A. Marguette

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

David A. Marguette

(NOTE: Registered Agent signature required when reappointing)

4/30/01

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 \$150.00
AFTER MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

David A. Marguette

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

DATE

(305) 371-9299

DAYTIME PHONE #

CR2E034 (11/00)