

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90064 034 ***550.00

DOCUMENT # P96000055373

1. Entity Name
GARCIA, ELKINS & BOEHRINGER, P.A.

Principal Place of Business

712 NORTH OLIVE AVE
W PALM BEACH FL 33401
US

Mailing Address

712 NORTH OLIVE AVE
W PALM BEACH FL 33401
US

2. Principal Place of Business

224 DATURA ST.

3. Mailing Address

224 DATURA ST.

Suite, Apt. #, etc.

SUITE #900

Suite, Apt. #, etc.

SUITE #900

City & State

W PALM BEACH, FL

City & State

W PALM BEACH, FL

Zip

Country

33401 USA

Zip

Country

33401 USA

4. FEI Number

65-0675866

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARCIA, ISIDRO M
712 NORTH OLIVE AVE
W PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name
GARCIA, ISIDRO M. (same)
Street Address (P.O. Box Number is Not Acceptable)
224 DATURA ST.
SUITE #900
City
WPALM BEACH FL Zip Code
33401

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(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 13, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARCIA, ISIDRO M 712 N OLIVE AVE W PALM BEACH FL 33401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ELKINS, JAMES S 712 N OLIVE AVE W. PLAM BCH FL 33401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOEHRINGER, MARIA K 712 N OLIVE AVE W PALM BCH FL 33401	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	(same) 224 DATURA ST., STE. #900 WPALM BEACH, FL 33401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(same) 224 DATURA ST., STE. #900 WPALM BEACH, FL 33401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(same) 224 DATURA ST., STE. #900 WPALM BEACH, FL 33401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(T) BOEHRINGER, MARIA K. 224 DATURA ST., STE. #900 WPALM BEACH, FL 33401	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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:

SIGNATURE REQUIRED ISIDRO M. GARCIA

9/9/02

(561)
832

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment

GARCIA, ELKINS & BOEHRINGER, P.A.
Attorneys at Law

979317

Isidro M. Garcia
James S. Elkins
M. Kate Boehringer

September 9, 2002

Document #
P96000055373, *Attachment*

ATTACHMENT TO 2002 UNIFORM BUSINESS REPORT FOR

GARCIA, ELKINS & BOEHRINGER, P.A. FEI 65-0675866

Changes to Block 6:

The only change is to the address; name of registered agent same

Changes to Block 11:b

The change is to the address for all officers and the spelling of the Treasurer's name (correct spelling: "Boehringer, Maria K")