FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Jun 02, 2002 8:00 am Secretary of State

06-02-2002 90904 041 ***150.00

1. Entity Name Law Office of David A. Brener P.A. 1. Entity Name David A. Brener P.A.					· .	06-02-2002 9090	14 U41 ****	*150.00	
DO NOT WRITE IN THIS SPACE					 	674408			
1 -	al Place of Business 33 State Real 7	3. Mailing Address			-		•		
Sufte, Ap	Suffe, Apt. #, etc. Syle. 300				DO NOT WRITE IN THIS SPACE				
City & State Bocg Rcton F1. City & State						4. FEI Number Applied For			
Zip Country USA		Zip Country					Not Applicable 5 Additional		
					7. Na	me and Address of Current Regist	Fee Re ered Agent		
-	DO NOT WI)!TE		me Da	ئے۔ ئے۔	A. Brenes			
IN THIS SPACE				Street Address (ox Number is Not Acceptable)			
				Boca	R	cton	Zip	Code 3 4 2 8	
8. The abov	ve named entity submits this statement for	the purpose of changing its	registered offi	ce or registere	ed age	ent, or both, in the State of Florida.		3726	
SIGNATURE	Signature, typed or printed name of registered agent and		resid	e 1 + signature required	when rei	5/28/s	E		
Tax filing	ooration is eligible to satisfy its Intangible requirement and elects to do so. eria on back)	Amended Make Check Payabl	I, Fee is \$55 UBR is \$61	0.00 -25	6	Election Campaign Financing Trust Fund Contribution.	□ \$	5.00 May Be dded to Fees	
	OFFICERS AND DI	RECTORS	TITLE						
NAME STREET ADDRESS	LAW OFFICE OF DAVI	b A. Brenerika	NAME						
STREET ADDRESS CITY-ST-ZIP	David A. Brenel, PR LAW OFFICE OF DAVI 20283 Stele Road 7	, Ste. 300	STREET ADDR	ESS					
TITLE	Boca Roton, Fl.	33498	TITLE	···	····				
NAME STREET ADDRESS			NAME	l					
CITY-ST-ZIP			STREET ADDRE	ess					
TITLE NAME			TITLE						
STREET ADDRESS			NAME STREET ADDRE	ec]	
CITY-ST-ZIP-			*CITY-ST-ZIP		~~;~~	-DO-NOT-WR	ITE		
TITLE NAME		-	TITLE			IN THIS SPA			
STREET ADDRESS			NAME STREET ADDRE	ss			O.L.		
CITY-ST-ZIP TITLE			CITY-ST-ZIP						
NAME	14		TITLE NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	is					
TITLE			CITY-ST-ZIP				·		
NAME			TITLE NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRES	s					
0111-01-211			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 eath; that I am an officer or director attachment with an address, with all other like empowered.

SIGNATURE:

5/28/02 (561)487-6070