

2004 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P97000015008

1. Entity Name

Bymel and Associates, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

2118 N.E. 56th Place

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

City & State

4. FEI Number

650751630

Applied For

Not Applicable

Zip

33308

Country

USA

Zip

Country

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

David E. Buck

2900 East Oakland Park Boulevard

Fort Lauderdale, FL 33306

Name

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

City

FL

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 registered agent and title if applicable

David E. Buck, Registered Agent

4/23/2004

(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 \$150.00
After MAY 1, 2000 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

TITLE D/P/T ☐ Delete
NAME Mary Bymel
STREET ADDRESS 2118 N.E. 56th Place
CITY-ST-ZIP Fort Lauderdale, FL 33308

TITLE D/V/S ☐ Delete
NAME Howard Bymel
STREET ADDRESS 2118 N.E. 56th Place
CITY-ST-ZIP Fort Lauderdale, FL 33308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
000037578950
06/02/04--01053--009 *\$300.00 ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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 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:

Howard Bymel

Vice President

4/23/04

954-491-8700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

PS 282

BYMEL & ASSOCIATES, INC.

A Fund Raising Consulting Firm Since 1984

May 15, 2004

Florida Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

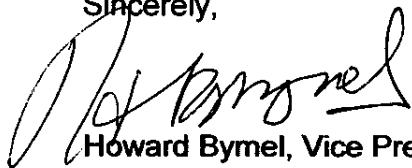
RE: Bymel & Assoc., Inc. (P97000015008) Annual Report

Dear Sir or Madam:

We learned from an internet search that our company is inactive in your records. We have no record of having received an Annual Report form from your office. Therefore, we have enclosed a check payable to the Department of State in the amount of \$300.00 representing the annual fee of \$150.00 for 2003, and the annual fee of \$150.00 for 2004.

Please accept our report and our payment as payment in full as we did not receive an earlier notice. Thank you for your consideration and cooperation in this matter.

Sincerely,



Howard Bymel, Vice President