

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000037246

1. Entity Name

FACTORY AUTHORIZED MEDICAL SCOPE REPAIRS, INC.

FILED

May 12, 2000 8:00 am
Secretary of State

05-12-2000 90049 033 ***150.00

Principal Place of Business

Mailing Address

637 NW 12TH AVENUE
DEERFIELD BEACH FL 33442

637 NW 12TH AVENUE
DEERFIELD BEACH FL 33442-1711

2. Principal Place of Business

2855 B West McNab Rd.

3. Mailing Address

2855 B West McNab Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

City & State

Pompano Beach, FL

Zip

33069

Country

U.S.A.

Zip

33069

Country

U.S.A.

4. FEI Number

59-3198089

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

TRANK, JEFFREY H
637 NW 12TH AVE
DEERFIELD BEACH FL 33442

Name

Jeff Trank

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

2855 B West McNab Rd.

City

Pompano Beach

FL

Zip Code

33069

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
AURAN, MITCHELL D
801 N. ATLANTIC DR
LANTURA FL 33462

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
TRANK, JEFFREY H
637 N.W. 12TH AVE
DEERFIELD BEACH FL 33442

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WELBES, TIMOTHY
11295 W. ATLANTIC BLVD, SUITE 202
CORAL SPRINGS FL 33071

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TRANK, RICHARD L
637 N.W. 12TH AVE.
DEERFIELD BEACH FL 33442

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO - TREASURER - D
Karst, Bradford
2855 B W. McNab Road
Pompano Beach, FL 33069

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD - D - SEC
Trank, Jeffrey H
2855 B West McNab Rd.
Pompano Beach, FL 33069

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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 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: Bradford Karst, CFO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00
Date

954-984-1844
Daytime Phone #

034 (9/99)