## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 18, 2000 8:00 am Secretary of State DOCUMENT # **P97000047944** 1. Entity Name BEVRICH, INC. 01-18-2000 90090 050 \*\*\*158.75 Mailing Address Principal Place of Business 1055 NW 121ST LANE 11690 WILES RD CORAL SPRINGS FL 33076 CORAL SPRINGS FL 33071-5006 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0755801 Not Applicable Country Zio \$8.75 Additional Zip Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ORETSKY, BEVERLY A Street Address (P.O. Box Number is Not Acceptable) 1055 NW 121ST LANE \_\_ Change of ADDRESS **CORAL SPRINGS FL 33071** 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, SIGNATURE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition Change **PSD** M Delete TITLE TITLE NAME BEVERLY ORETSKY NAME ORETSKY, RICHARD S 1055 NW 121 LANE STREET ADDRESS STREET ADDRESS 1055 NW 121ST LANE CORAL SpRINGS FL CITY-ST-ZIP 3307 CITY-ST-ZIP **CORAL SPRINGS FL 33071 Change** TITLE ☐ Delete TITLE JIII ORETSKY NAME NAME ORETSKY, BEVERLY A 1055 NW 121 LANG STREET ADDRESS STREET ADDRESS 1055 NW 121ST LANE CITY-ST-ZIP CORAL SPRINGS-FL CITY-ST-ZIP CORAL SPRINGS FL 33071 ☐ Addition Change ☐ Delete TITLE TITLE ORETSKY, JILL A NAME NAME STREET ADDRESS STREET ADDRESS 1055 NW 121ST LANE CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33071 Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7JP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P

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 received 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 ke empowered.

SIGNATURE:

SIGNATURE AND TYPED OR P