

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

FILED

DOCUMENT # P97000083470

02 JUL -2 PM 2:52

1. Entity Name

Surgical Solutions, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2424 N. Federal Hwy

3. Mailing Address

2424 N. Federal Hwy

Suite, Apt. #, etc.

#456

Suite, Apt. #, etc.

#456

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

33431

Country

USA

Zip

33431

Country

USA

4. FEI Number

65-0784008

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

David J. Menkhaus

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

2424 N. Federal Hwy

Suite 456

City

Boca Raton

FL

Zip Code

33431

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]

David J. Menkhaus

6/24/02

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)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P.D.
David J. Menkhaus
2424 N. Federal Hwy #456
Boca Raton, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

100006230811-
-07/05/02--01076--011
*****300.00 *****300.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P.
Thomas L. Sharpe
2424 N. Federal Hwy #456
Boca Raton, FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V.P.
Terri Freemond
1325 So. Congress Ave #211
Boca Raton, FL 33426

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David J. Menkhaus

6/24/02

Daytime Phone #

561-394-7910

CR2000B (1201)

SURGICAL SOLUTIONS, INC.
2424 NORTH FEDERAL HIGHWAY
SUITE 456
BOCA RATON, FL 33431
(Telephone) 561-394-7910
(Fax) 561-393-6541

June 24, 2002

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

RE: Surgical Solutions, Inc.
EIN: 65-0786008
Reinstatement

Dear Gentlemen:

It has come to our attention that the above-referenced company was administratively dissolved due to the lack of filing the 2001 and 2002 UBRs. After speaking with your representative, the forms had been returned as undeliverable by the Post Office. We are requesting that the company be reinstated and all reinstatement fees be waived. Enclosed, please find a check for \$300.00 made payable to the Dept. of State for the original filing fees for the 2001 and 2002 UBR forms. Thank you for your assistance in this matter.

Sincerely,



Debbie Renken
Secretary to David J. Menkhaus