

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2001 8:00 am
Secretary of State

02-27-2001 90304 036 ***150.00

DOCUMENT # P98000025739

1. Entity Name
F.M. DAHLE, INC.

Principal Place of Business

**999 BRICKELL AVE
 700
 MIAMI FL 33131**

Mailing Address

**999 BRICKELL AVE
 700
 MIAMI FL 33131**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0829193**

Applied For

Not Applicable

Zip

Country

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

**KIRSTEN I. BAIER, P.A.
 999 BRICKELL AVE
 STE 700
 MIAMI FL 33131**

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.

(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, 2001 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 ☐ Delete
 NAME **DPST**
 STREET ADDRESS **DAHLE, F M**
 CITY-ST-ZIP **999 BRICKELL AVE STE 700**
MIAMI FL 33131

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] **attorney in fact per P.O.A.** **2/19/2001** **372-0288**

CR2E034 (10/00)

Attachment #
P98000025739

SPECIAL POWER OF ATTORNEY FOR

F.M. DAHLE, INC.

A Florida professional service corporation, with its principal place of business in Dade County, Florida, does hereby appoint Kirsten I. Baier, Esq. as its attorney in fact for the limited purposes of executing, filing and preparing the corporate annual reports to be filed with the Secretary of State for the following years: 2001.

The above authority shall commence for the year 2001 and shall terminate upon the earlier of the appointee receiving written notice thereof or upon the filing of the annual report for the year of 2001.

Within the power of attorney was granted pursuant to resolution by the Board of Directors of the above named professional service corporation and said power is hereby ratified and confirmed this 12 th day of February, 2001.

F. M. Dahle

President F. Michael Dahle