

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90216 040 ***150.00

DOCUMENT # P98000026007

1. Entity Name

SOUTH FLORIDA ENT ENTERPRISES, INC.

Principal Place of Business

C/O 8940 NORTH KENDALL DRIVE
 SUITE 504 EAST
 MIAMI FL 33176

Mailing Address

C/O 8940 NORTH KENDALL DRIVE
 SUITE 504 EAST
 MIAMI FL 33176

AU021711



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8940 North Kendall Drive

3. Mailing Address

8940 North Kendall Drive

Suite, Apt. #, etc.

Suite 505 E

Suite, Apt. #, etc.

Suite 505 E

City & State

Miami FL

City & State

Miami FL

Zip

33176

Country

USA

Zip

33176

Country

USA

4. FEI Number 65-0826500

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES, INC.
 MIAMI CENTER
 201 S. BISCAYNE BLVD., SUITE 3000
 MIAMI FL 33131

7. Name and Address of New Registered Agent

Name Frank Kronberg, M.D.
 Street Address (P.O. Box Number is Not Acceptable) 8940 North Kendall Drive, Suite 505 E
 City Miami, FL Zip Code 33176

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

Frank Kronberg

01/25/01

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

TITLE	D	<input type="checkbox"/> Delete
NAME	KRONBERG, FRANK G. N.D.	
STREET ADDRESS	8940 NORTH KENDALL DRIVE SUITE 504 EAST	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOUGHERTY, BRIAN E. N.D.	
STREET ADDRESS	8940 NORTH KENDALL DRIVE SUITE 504 EAST	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRONBERG, FRANK G. M.D.	
STREET ADDRESS	8940 North Kendall Drive Suite 505 E	
CITY-ST-ZIP	Miami FL 33176	
TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOUGHERTY, BRIAN E. M.D.	
STREET ADDRESS	8940 North Kendall Drive Suite 505 E	
CITY-ST-ZIP	Miami FL 33176	
TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FOSTER, CHIFFORD M.D.	
STREET ADDRESS	8940 N. KENDALL DRIVE, SUITE 505 E	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TARKAN, STEVAL, M.D.	
STREET ADDRESS	8940 N. KENDALL DRIVE, SUITE 505 E	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Frank Kronberg President

Date

Daytime Phone #

2/6/01 305-595-6200

CR2E034 (10/00)