

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

BENTEX ASSOCIATES, INC.

P98000054739

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90104 013 \*\*\*150.00

Principal Place of Business

Mailing Address

2. Principal Place of Business

2711 NW. 17TH AVE

Suite, Apt. #, etc.

3. Mailing Address

2711 NW. 17TH AVE

Suite, Apt. #, etc.

City & State

MIAMI, FLA

Zip 33142

Country DADE

City & State

MIAMI FLA

Zip 33142

Country DADE

DO NOT WRITE IN THIS SPACE

65-0846731

4. FEI Number

06171998

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CROSBY, BENJAMIN F. III  
7425 WILSON ROAD  
WEST PALM BEACH, FLA  
33143

7. Name and Address of New Registered Agent

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, 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

TITLE DIRECTOR PRESIDENT ☐ Delete  
NAME BENJAMIN F. CROSBY III  
STREET ADDRESS 7425 WILSON ROAD  
CITY-ST-ZIP WEST PALM BEACH, FLA 33143

TITLE DIRECTOR, SEC. TREASURER ☒ Delete  
NAME KATE PRECHTER  
STREET ADDRESS 505 BROADWAY ST  
CITY-ST-ZIP NEW ORLEANS, LA 70118

TITLE ☐ Delete  
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12.

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CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

DIRECTOR, SEC. TREASURER ☐ Change ☒ Addition  
NAME BENJAMIN F. CROSBY JR.  
STREET ADDRESS 7425 WILSON RD.  
CITY-ST-ZIP WEST PALM BEACH, FLA 33143

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 984-6970

CR2E034 (9/99)