

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State

03-05-2001 90294 035 ***158.75

DOCUMENT # P98000074723

1. Entity Name

GACHRIC BRACING INC.

Principal Place of Business

1505 N.W. 112 WAY
PEMBROKE PINES FL 33026

Mailing Address

1505 N.W. 112 WAY
PEMBROKE PINES FL 33026

2. Principal Place of Business

200 5th Birch Rd

Suite, Apt. #, etc.

Apt # 511

City & State

Ft. Lauderdale FL

Zip

33316

Country

Broward

3. Mailing Address

200 5th Birch Rd

Suite, Apt. #, etc.

Apt # 511

City & State

Ft. Lauderdale FL

Zip

33316

Country

Broward

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0863811**Applied For
Not Applicable5. Certificate of Status Desired ☒**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

NELSON, BRIAN H ESQ.
WAMPLER, BUCHANAN & BREEN, P.A.
777 BRICKELL AVE., SUITE 900
MIAMI FL 33131

7. Name and Address of New Registered Agent

Nelson, Brian H Esq at Aterman Senter Fitt

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

**One S.E. 3rd
AVENUE 28th Floor**City **Miami**FL Zip Code **33131-1214**

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	☒ Delete
NAME	GACH, RICHARD E JR.	Note change of Address Below
STREET ADDRESS	1505 N.W. 112 WAY	
CITY-ST-ZIP	PEMBROKE PINES FL 33026	

TITLE	Gach, Richard E JR.	☐ Delete
NAME	200 5th Birch Rd Apt # 511	President
STREET ADDRESS	Ft. Lauderdale FL 33316	
CITY-ST-ZIP		

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE		☐ Change ☐ Addition
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TITLE		☐ Change ☐ 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: Richard E Gach Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/22/01

Date

Daytime Phone #

CR2E034 (10/00)