

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000027205

1. Entity Name

DAWN R. BHASIN, M.D., P.A.

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90141 019 ***150.00

Principal Place of Business

Mailing Address

2113 SOUTHVIEW AVE., UNIT B
TAMPA FL 33606

2113 SOUTHVIEW AVE., UNIT B
TAMPA FL 33629-6044

2. Principal Place of Business

2907 W. SAN NICHOLAS ST

3. Mailing Address

2907 W. SAN NICHOLAS ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL 33629

City & State

TAMPA, FL 33629

Zip

Country

Zip

Country

4. FEI Number

59-3567905

Applied For

Not Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BHASIN, DAWN R
2113 SOUTHVIEW AVE., UNIT B
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

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

2907 W. SAN NICHOLAS ST

City

TAMPA

FL

Zip Code

33629

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

Dawn R. Bhasin

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/28/00

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 PSTD ☐ Delete
NAME BHASIN, DAWN R
STREET ADDRESS 2113 SOUTHVIEW AVE., UNIT B
CITY-ST-ZIP TAMPA FL 33606

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Delete
NAME
STREET ADDRESS 2907 W. SAN NICHOLAS ST.
CITY-ST-ZIP TAMPA, FL 33629

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

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

TITLE ☐ Change ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Delete
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:

Dawn R. Bhasin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

1/20/00 (813) 259-0029