

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000074370

1. Entity Name

BINKLEY ENTERPRISES, INC.

Principal Place of Business

18601 S.W. 15TH STREET
PEMBROKE PINES FL 33029

Mailing Address

18601 S.W. 15TH STREET
PEMBROKE PINES FL 33029

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0944091

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHOENFELD, WILLIAM
18601 S.W. 15TH STREET
PEMBROKE PINES FL 33029

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SCHOENFELD, WILLIAM
18601 S.W. 15TH STREET
PEMBROKE PINES FL 33029

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change

Addition

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(l), 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

8/25/00 954-680-8445

Date

Daytime Phone #

CR2E03A (5/00)

Attachment
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A0075673

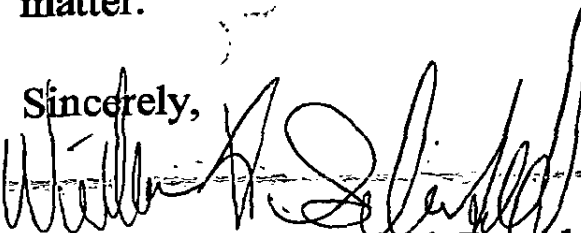
To: Uniform Business Report Filings
Division of Corporations

From: Binkley Enterprises, Inc.
William K. Schoenfeld, President

RE: Corporation Renewal, Document
#P99000074370.

To Whom It May Concern:
on Wednesday August 30th. I called your office regarding
the above renewal and unfortunately I didn't get the name
of the lady I spoke with however I explained to her that I
am a new business owner and this is my first year in
business and since I did not receive the first notice I was
sent I was not aware of the document and the payment I
was supposed to send until I received the second notice I
explained this on the phone and the person I spoke with
said to just send the \$150.00 and a letter explaining what
happened. I really appreciate all your understanding in this
matter.

Sincerely,


William K. Schoenfeld, President
Binkley Enterprises, Inc.

08-31-00