2002 UNIFORM BUSINESS REPORT (UBR)

Jan 09, 2002 8:00 am **DOCUMENT #** S09460 Secretary of State 1. Entity Name BENNETT, FRIEDER & ASSOCIATES, INC. 01-09-2002 90001 024 ***150.00 Principal Place of Business Mailing Address 1283 NW 31 AVENUE 1283 NW 31 AVENUE FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0225045 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENNETT, ARNOLD Street Address (P.O. Box Number is Not Acceptable) 1283 NORTHWEST 31ST AVENUE FORT LAUDERDALE FL 33311 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Change ☐ Addition CR2E034 (9/01 NAME BENNETT, ARNOLD NAME STREET ADDRESS 1283 NORTHWEST 31ST AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33311 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FRIEDER, JERRY NAME STREET ADDRESS 1283 NORTHWEST 31ST AVENUE STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33311 CITY-ST-ZIP TITLE ☐ Delete -TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

bes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

13. I hereby certify that the information supplier indicated on this report or supplier ental reof the corporation or the receiver or truther changed, or on an attachment with

SIGNATURE

197-1411

FILED