

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 12, 2000 8:00 am**  
**Secretary of State**

05-12-2000 90054 047 \*\*\*150.00

DOCUMENT # V31283

1. Entity Name  
**BENCH ADS OF TAMARAC, INC.**

Principal Place of Business 950 NE 40TH CT #1202 OAKLAND PARK F 33334 US	Mailing Address 950 NE 40TH CT. OAKLAND PARK FL 33334-3020 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 19589 N.E. 10AVE Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Miami, Florida	City & State
Zip 33179	Country USA

4. FEI Number 65-0439602	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**TOMCZAK, RAYMOND J**  
**950 N.E. 40TH CT**  
**SUITE 300**  
**OAKLAND PARK FL 33308**

7. Name and Address of New Registered Agent  
 Name **CORT A. NEIMARK**  
 Street Address (P.O. Box Number is Not Acceptable)  
**800 CORPORATE DRIVE**  
**SUITE 420**  
 City **FORT LAUDERDALE** FL Zip Code **33334**

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 *Cort A. Neimark* (NOTE: Registered Agent signature required when reinstating)  
 DATE 4/27/00

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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>NADEL, ERIC</b> <b>3360 NE 192 ST. - #1202</b> <b>NO. MIAMI BEACH FL 33180</b>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TOMCZAK, RAY</b> <b>3081 NE 43RD ST</b> <b>FT LAUDERDALE FL 33308</b>	<input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Eric Nadel* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 DATE 4/26/00 DATE  
 DAYTIME PHONE # 305-999-0091 DAYTIME PHONE #

CR2E034 (9/99)