

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V56355

1. Entity Name

CHRISTINE E. BRYCE, P.A.

**FILED**  
**Feb 21, 2000 8:00 am**  
**Secretary of State**

02-21-2000 90016 045 \*\*\*150.00

Principal Place of Business

Mailing Address

18350 NW 2ND AVENUE  
FIFTH FLOOR  
MIAMI FL 33169  
US

18350 NW 2ND AVENUE  
FIFTH FLOOR  
MIAMI FL 33169-4519  
US

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 65-0352325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRYCE, CHRISTINE E.  
-18350 NW 2ND AVENUE  
FIFTH FLOOR  
MIAMI FL 33169

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 \$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 P  
NAME BRYCE, CHRISTINE E  
STREET ADDRESS 20401 N.W. 2ND AVE, #206  
CITY-ST-ZIP MIAMI FL 33169 ☒ Delete

TITLE PRESIDENT  
NAME BRYCE, CHRISTINE E  
STREET ADDRESS 18350 N.W. 2ND AVENUE, 5TH FL  
CITY-ST-ZIP MIAMI, FLORIDA 33169 ☒ Change ☐ Addition

TITLE V  
NAME JOHNSON, DALTON A  
STREET ADDRESS 250 SW 98TH TERRACE  
CITY-ST-ZIP PEMBROKE PINES FL ☒ Delete

TITLE VICE PRESIDENT  
NAME VIVIA E. MCTAGART  
STREET ADDRESS 250 SW 98TH TERRACE  
CITY-ST-ZIP PEMBROKE PINES, FL 33169 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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)(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 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

Date

Daytime Phone #

2/15/00 (305) 651-4558