

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90160 048 ***150.00

DOCUMENT # P94000016241

1. Entity Name
TB ENTERPRISES, INC



Principal Place of Business
**374 N. CONGRESS DR.
BOYNTON BEACH FL 33426
US**

Mailing Address
**374 N. CONGRESS DR.
BOYNTON BEACH FL 33426
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0476543**

☒ 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

**TORREJON, JORGE A JR
23379 BOCA TRACE DR.
BOCA RATON FL 33433**

Name

TORREJON, JORGE A JR

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

6689 HOULTON CIRCLE

LAKE WORTH

City

FL

Zip Code
33467

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

JORGE A. TORREJON JR

PRESIDENT

2/21/03

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P**
NAME **TORREJON, JORGE A**
STREET ADDRESS **23379 BOCA TRACE**
CITY-ST-ZIP **BOCA RATON FL 33433**

☐ Delete

TITLE **P**
NAME **TORREJON JORGE A**
STREET ADDRESS **6689 HOULTON CIRCLE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

☒ Change ☐ Addition

TITLE **VP**
NAME **TORREJON, JESSICA**
STREET ADDRESS **23379 BOCA TRACE**
CITY-ST-ZIP **BOCA RATON FL 33433**

☐ Delete

TITLE **VP**
NAME **TORREJON JESSICA**
STREET ADDRESS **6689 HOULTON CIRCLE**
CITY-ST-ZIP **LAKE WORTH FL 33467**

☒ Change ☐ Addition

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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TORREJON JR
2/21/03
(561) 374-7990