

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 13, 2000 8:00 am
Secretary of State

02-13-2000 90018 008 ***150.00

DOCUMENT # P93000063534

1. Entity Name

TIMELY ESSENTIALS, INC.

Principal Place of Business

Mailing Address

8505 MILLS DRIVE
MIAMI, FL 33183
US

14 NE 1ST AVENUE
STE. 607
MIAMI FL 33132-2405
US

2. Principal Place of Business

8505 MILLS DRIVE
Suite, Apt. #, etc.

3. Mailing Address

55 N.E. 1ST STREET
Suite, Apt. #, etc.

City & State
MIAMI FL 33183

City & State
MIAMI FL

Zip Country
33183 US

Zip Country
33132 US

4. FEI Number **65-0434698**

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

TOLEDO, ELVIS
14 NE 1ST AVE
SUITE 607
MIAMI FL 33132

Name: **TOLEDO, ELVIS**
Street Address (P.O. Box Number is Not Acceptable): **55 N.E. 1ST STREET**
SUITE 8
City: **MIAMI** FL Zip Code: **33132**

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 **ELVIS TOLEDO PRESIDENT**

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

(NOTE: Registered Agent signature required when reinstating)

DATE **1/26/00**

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 **PD** ☐ Delete
NAME **TOLEDO, ELVIS**
STREET ADDRESS **14640 SW 107 TER**
CITY-ST-ZIP **MIAMI FL**

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

TITLE **VPD** ☐ Delete
NAME **TOLEDO, CARMEN**
STREET ADDRESS **14640 SW 107 TERR**
CITY-ST-ZIP **MIAMI FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

ELVIS TOLEDO PRESIDENT **1/26/00** **(305) 381-9033**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)