

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 26, 2002 8:00 am
Secretary of State

08-26-2002 90058 001 ***300.00

DOCUMENT # F98000001665

1. Entity Name
BEST VENDORS CO.

Principal Place of Business

**2626 WEST LAKE STREET
MINNEAPOLIS MN 55416**

Mailing Address

**2626 WEST LAKE STREET
MINNEAPOLIS MN 55416**

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 **41-1356424**

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

**C T-CORPORATION-SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 ☐ Delete
NAME **PCD**
STREET ADDRESS **WEISMAN, WILLIAM E**
CITY-ST-ZIP **2626 W LAKE STREET
MINNEAPOLIS MN**

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

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **WILSON, MARK**
CITY-ST-ZIP **2626 WEST LAKE STREET
MINNEAPOLIS MN 55416**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

WEISMAN ENTERPRISES, INC.™



Attachment

98539
F98000001665

BEST VENDORS CO.

August 5, 2002

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Our Corporation did not receive a prior notice for filing the annual Uniform Business Report. Therefore, we are asking that the \$400.00 late fee be waived. Enclosed you will find a check for the original filing fee of \$150.00.

Sincerely,

Mark L. Wilson

MLW/ajc
Enclosures

UPON RECEIPT OF THIS CHECK, THE FOLLOWING INFORMATION IS TO BE PROVIDED TO THE
DIVISION OF CORPORATIONS, UNIFORM BUSINESS REPORT FILINGS, PO BOX 1500,
TALLAHASSEE, FL 32302-1500. THE INFORMATION IS TO BE PROVIDED TO THE
DIVISION OF CORPORATIONS, UNIFORM BUSINESS REPORT FILINGS, PO BOX 1500,
TALLAHASSEE, FL 32302-1500.