

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90009 041 ***150.00

DOCUMENT # 452423

1. Entity Name

OUR WAREHOUSE, INC.

Principal Place of Business

2749 E ATLANTIC BLVD
~~SUITE 200~~
POMPANO BEACH FL 33062
US

Mailing Address

2749 E ATLANTIC BLVD
~~SUITE 200~~
POMPANO BEACH FL 33062
US

2. Principal Place of Business

2749 E. Atlantic blvd
Suite, Apt. #, etc.

3. Mailing Address

2749 E. Atlantic blvd
Suite, Apt. #, etc.

City & State

Pompano Beach-FLA.

City & State

Pompano Beach - FLA

Zip

33062

Country

USA

Zip

33062

Country

USA

4. FEI Number

59-1595125

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

WHITE, RANDOLPH G
8560 SHAWEE WAY
~~SUITE 300~~
BOCA RATON FL 33433

Name

RANDOLPH G WHITE

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

371 NW 45TH AVE

City

DEERFIELD BEACH

FL

Zip Code

33442

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

R. G. White

RANDOLPH G WHITE

2-16-01

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, 2001 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 **STD** ☐ Delete
NAME **WALDRON, SUZETTE**
STREET ADDRESS **2749 E ATLANTIC BLVD**
CITY-ST-ZIP **POMPANO BEACH FL 33062**

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

TITLE **PD** ☐ Delete
NAME **WILSON, FRANCES**
STREET ADDRESS **2749 E ATLANTIC BLVD**
CITY-ST-ZIP **POMPANO BEACH FL 33062**

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

TITLE ☐ Delete
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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: *Suzette Waldron*

Suzette Waldron

2/16/01

Date

954 941-1818

Daytime Phone #

CR2E034 (10/00)