

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90125 018 ***150.00

DOCUMENT # F00000003376

1. Entity Name

7871, INC.

Principal Place of Business

**11900 BISCAYNE BLVD., STE 505
 NORTH MIAMI FL 33181**

Mailing Address

**11900 BISCAYNE BLVD., STE 505
 NORTH MIAMI FL 33181**

2. Principal Place of Business

3. Mailing Address

65 N. E. 27th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

MIAMI FLORIDA

4. FEI Number

65-0922031

Applied For

Not Applicable

Zip

Country

Zip

Country

33137

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

**THULIN, JOHN
 11900 BISCAYNE BLVD
 #505
 MIAMI FL 33181**

Name

THULIN, JOHN

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

65 N. E. 27th STREET

City

MIAMI

FL

Zip Code

33137

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, 2002 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 ☐ Delete
 NAME **PCDS**
 STREET ADDRESS **FRIEDMHEIM, RAYMOND**
 CITY-ST-ZIP **11900 BISCAYNE BLVD., STE 505
 NORTH MIAMI FL**

TITLE ☐ Change ☐ Addition
 NAME **FRIEDHEIM, RAYMOND**
 STREET ADDRESS **65 N.E. 27th STREET**
 CITY-ST-ZIP **MIAMI, FL 33137**

TITLE ☐ Delete
 NAME **VD**
 STREET ADDRESS **WILLIMANN, ROBERT**
 CITY-ST-ZIP **11900 BISCAYNE BLVD., STE 505
 NORTH MIAMI FL**

TITLE ☒ Change ☐ Addition
 NAME **65 N.E. 27th STREET**
 STREET ADDRESS **MIAMI, FL 33137**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **TD**
 STREET ADDRESS **THULIN, JOHN**
 CITY-ST-ZIP **11900 BISCAYNE BLVD., STE 505
 NORTH MIAMI FL**

TITLE ☒ Change ☐ Addition
 NAME **65 N.E. 27th STREET**
 STREET ADDRESS **MIAMI, FL 33137**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
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TITLE ☐ Delete
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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

John Thulin

4/24/02

Date

Daytime Phone #

305-891-0104

CR2E034 (9/01)