

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90744 040 ***158.75

DOCUMENT # *F01191*

1. Entity Name

Tyson Tiny Tots Inc.



DO NOT WRITE IN THIS SPACE

54048886

2. Principal Place of Business

542-22nd St.

3. Mailing Address

Suite, Apt. #, etc.

West Palm Beach

Suite, Apt. #, etc.

City & State

FL

City & State

Zip

33407

Country

Palm Beach

Zip

33407

Country

Palm Beach

4. FEI Number

59-2665236

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Joseph B. Tyson

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

3521 W. 35th St.

City

Riviera Beach

FL

Zip Code

33404

**DO NOT WRITE
IN THIS SPACE**

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE *President*
NAME *Scott Tyson*
STREET ADDRESS *3521 W. 35th St*
CITY-ST-ZIP *Riviera Beach FL 33404*

TITLE *V. President*
NAME *Sandra Butler*
STREET ADDRESS *2024 Ponce de Leon*
CITY-ST-ZIP *W. P. B. FL 33407*

TITLE *Sec.*
NAME *Altamease Buie*
STREET ADDRESS *1800 Embassy Dr, #107*
CITY-ST-ZIP *West Palm Beach FL 33401*

TITLE *Treasurer*
NAME *Karl B. Tyson*
STREET ADDRESS *1125 W 30th St.*
CITY-ST-ZIP *Riviera Beach FL 33404*

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Scott B. Tyson *Scott B. Tyson*

4/26/04

(361) 833-1388

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)