

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90135 030 ***158.75

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F01191 1. Entity Name TYSON'S TINY TOTS, INC.					
Principal Place of Business 542 22ND ST. C/O JOSEPH B.L TYSON WEST PALM BEACH, FL 33407-5804			Mailing Address 542 22ND ST. C/O JOSEPH B.L TYSON WEST PALM BEACH, FL 33407-5804		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2665236	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent TYSON, JOSEPH B 542 22ND ST. WEST PALM BEACH, FL			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent's signature required when existing) _____ DATE _____					
FILE NOW WITH FEES IS \$150.00 After May 1, 2003 Fee will be \$550.00 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VTD TYSON, JOSEPH B. 542 22ND ST. WEST PALM BEACH, FL 334075804		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD SCOTT L. TYSON 3521 W. 35th St. Riviera Beach, FL 33404	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TYSON, MALISSA N 542 22ND STREET W PALM BEACH, FL 0,		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD TYSON, KARL B 542 22ND STREET W PALM BEACH, FL 0,	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	O BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD BUJE, ALTERMEASE C/O 542 22ND STREET W PALM BEACH, FL	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(13)(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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Melissa N. Tyson, Malissa N. Tyson</u>			Date: <u>4/7/03</u> (26) <u>833-1380</u>		

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☐ CHECK HERE IF MAKING CHANGES

CP2E034 (10/02)