

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

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90369 008 ***150.00

DOCUMENT # F85141

1. Entity Name

Buying Specialists, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

P.O. 840855

Suite, Apt. #, etc.

P.O. 840855

City & State

Pembroke Pines FL

City & State

Pembroke Pines, FL

Zip

33084

Country

US

Zip

33084

Country

US

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2209871

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Diane M. Harbeck

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

18252 NW 15 Court

City

Pembroke Pines

FL

Zip Code

33029

**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.

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) ☐

January 1 - May 1 Fee is \$150.00 ✓

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE PD
NAME Gary D. Harbeck
STREET ADDRESS 18252 NW 15 Court
CITY-ST-ZIP Pembroke Pines, FL 33029

TITLE STD
NAME Diane M. Harbeck
STREET ADDRESS 18252 NW 15 COURT
CITY-ST-ZIP Pembroke Pines, FL 33029

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

SIGNATURE: Diane Harbeck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STD

3/16/02

Date

954-431-1468

Daytime Phone #

CR2E034B (12/01)