

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91234 024 ***150.00

DOCUMENT # G93268

1. Entity Name

POTATO SACK KIDS, INC.

Principal Place of Business

Mailing Address

1713 WHITEHALL DRIVE
 7106 E. TROPICAL WAY
 FT LAUDERDALE FL 33317
 US

1713 WHITEHALL DRIVE
 301
 FT LAUDERDALE FL 33324
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1713 WHITEHALL DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#301

City & State

City & State

FT. LAUDERDALE, FLORIDA

4. FEI Number

21-3288583

Applied For

Not Applicable

Zip

Country

Zip

Country

33324

U.S.

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

**DEHN, JAMES A.
 7106 E. TROPICAL WAY
 PLANTATION FL 33317**

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.

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, 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 **SD** ☐ Delete
 NAME **DEHN, JAMES A.**
 STREET ADDRESS **7106 E. TROPICAL WAY**
 CITY-ST-ZIP **PLANTATION FL**

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

TITLE **D** ☐ Delete
 NAME **DEHN, MARY R.**
 STREET ADDRESS **7106 E. TROPICAL WAY**
 CITY-ST-ZIP **PLANTATION FL**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 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

Date

Daytime Phone #

CR2E034 (10/00)

May 14, 2001

Attachment

Division of Corporations
Uniform Business Report Filing
P.O. Box 1500
Tallahassee, Fla., 32302-1500

058127
693268

To Whom It May Concern,

I regret I did not send in my fee for
\$150.00 ~~on~~ by May 1 due to an oversight on my part.

My husband was diagnosed with terminal
cancer and we have been going back and forth
to Jackson Memorial Cancer Hospital which he will
be admitted to on Wednesday for bone biopsy.
I have not even looked at mail till now and
found our renewal ~~fee~~ fee was over due by 14 days.

We are not active in the business but do not
wish to lose our Potato Sack Kid, Inc. name as
I hope in the ~~future~~ ~~to~~ future to start it up
again.

I hope this check for \$150.00 will be
okay with you due to the problems we are
having at this time with my husband

Thanking you,

Mary R. Dehn
954-321-9900

1713 Whitehall Dr. #301
Ft. Lauderdale Fl. 33324