

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90407 038 ***150.00

DOCUMENT # K28405

1. Entity Name

MR. STEVE, INC.

Principal Place of Business

**180 B SOUTH FEDERAL HWY
 BOCA RATON FL 33432
 US**

Mailing Address

**180 B SOUTH FEDERAL HWY
 BOCA RATON FL 33432
 US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **65-0063640**

Applied For

Not Applicable

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

**OSBORNE, R. BRADY, JR
 998 S. FEDERAL HWY
 BOCA RATON FL 33432**

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 **D** ☐ Delete
 NAME **TIPTON, STEVE**
 STREET ADDRESS **5406 BAYSIDE DR**
 CITY-ST-ZIP **LAKE WORTH 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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 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:

Steven W Tipton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/01

Date

561-395-2544

Daytime Phone #

CR2E034 (10/00)



SOCIAL SECURITY

Attachments

K28405
B0057813

MR STEVE INC
1808 S FED HWY
BOCA RATON FL 33432

SOCIAL SECURITY ADMINISTRATION
WILKES-BARRE DATA OPERATIONS CTR.
1150 E. MOUNTAIN DR.
WILKES-BARRE, PA. 18702

DATE:

5/1/01

TELEPHONE NUMBER:

1-800-775-7802 EXT. 1599

THE ENCLOSED CHECK FOR \$ 150.00

WAS APPARENTLY SENT TO US IN ERROR. THEREFORE, WE ARE
RETURNING IT TO YOU FOR FORWARDING TO THE PROPER INDIVIDUAL
OR AGENCY.

DEAR Sir,

AT THIS TIME I WAS IN THE
MIDDLE OF A DIVERSE, A VERY EMOTIONAL event
IN THE MIX OF THINGS I sent my (UBR) TO
THE SOCIAL SECURITY ADMINISTRATION DATA OPERATION
CENTER, ENCLOSED IS THE ENVELOPE THEY RETURNED WITH
THE DATE SENT APRIL 3RD PLEASE HAVE MERCY AND REINSTATE
MY COOPERATION/65-0063640 FBI #) 561 395-2544 Sorely