

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

K57510

1. Entity Name

THE TURNWALD CORPORATION

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

2893 SW 69th COURT

Suite, Apt. #, etc.

2893 SW 69th COURT

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33155

Country

USA

Zip

33155

Country

USA

4. FEI Number

65-0136960

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

TURNWALD, HANS A.

4209 SALZEDO

CORAL GABLES, FL 33134

Name

TURNWALD, HANS A.

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

2893 SW 69th COURT

City

MIAMI

FL

Zip Code

33155

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

Hans A. Turnwald
Signature, typed or printed name of registered agent and title if applicable.

HANS A. TURNWALD

(NOTE: Registered Agent signature required when reinstating)

DATE

Sept. 13, 2001

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NUMBER: 15-0136960

After MAY 1, 2001 Fee will be \$550.00

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
NAME
STREET ADDRESS
CITY-STATE-ZIP
VT
TURNWALD, HANS ADOLF
1632 S BAYSHORE CT. #2
MIAMI, FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
700004614357-7
-09/27/01--01086--018
*****150.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
PD
TURNWALD, ANNE LIESE
1632 S BAYSHORE CT. #2
MIAMI, FL 33133 ☐ Delete

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

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Bry/27 ☐ Change ☐ Addition

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CITY-STATE-ZIP
☐ Delete

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

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:

Hans A. Turnwald

HANS A. TURNWALD

(786) 388-7722

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

September 12, 2001

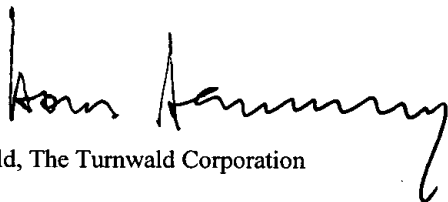
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir:

My business moved to a new location in 2000, and I did not receive a 2001 Uniform Business Report. Enclosed is the form and my check for \$150.00. Please abate any penalties and interest.

Thank you.

Sincerely,

A handwritten signature in dark ink, appearing to read "Hans Turnwald", written in a cursive style.

Hans Turnwald, The Turnwald Corporation