

2001 UNIFORM BUSINESS REPORT (UBR)

0016820 AF

DOCUMENT # L00000005158

1. Entity Name
TAMPA BAY INVESTMENT GROUP, LLC

FILED

01 APR -5 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3908 RYALWOOD COURT
VALRICO FL 33594

Mailing Address

3908 RYALWOOD COURT
VALRICO FL 33594

2. Principal Place of Business

126 Third Ave N.

Suite, Apt. #, etc.

Suite 101

City & State

Safety Harbor FL

Zip

34695

Country

3. Mailing Address

126 Third Ave N.

Suite, Apt. #, etc.

Suite 101

City & State

Safety Harbor FL

Zip

34695

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3642830

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
941 FOURTH STREET #200
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name Peter Bennett

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

126 Third Ave N.

Suite 101

City

Safety Harbor

FL

Zip Code

34695

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 *Peter Bennett* Peter Bennett

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

(NOTE: Registered Agent signature required when reinstating)

3/19/01

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME ☐ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP
President
Samter Construction, Inc.
126 Third Ave N. Suite 101
Safety Harbor FL 34695

TITLE NAME ☐ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP
Treasurer
Parker Investments
3908 Ryalwood Court
Valrico FL 33594

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

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP
9000004013435-8
-04/17/01-01070-024
*****50.00 *****50.00

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

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Peter Bennett* Peter Bennett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/19/01

Date

727-723-7771

Daytime Phone #

CR2E083 (11/00)