

FILED

Aug 10, 2001 8:00 am
Secretary of State

08-10-2001 90003 033 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000006080

1. Entity Name

PRO-MOTION OF THE TREASURE COAST INC.

LA

Principal Place of Business

3174 NW FEDERAL HWY.
JENSEN BEACH FL 34595

Mailing Address

3174 NW FEDERAL HWY.
JENSEN BEACH FL 34595

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3174 NW Fed Hwy

3. Mailing Address

2409 SE Grand DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jensen Bch, Fla.

City & State

Pt. St. Lucie, FLA.

Zip

34595

Country

Zip

34952

Country

4. FEI Number

65-117325

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

WALKER, HAROLD JASON
720 S.W. ARKANAS TERR
PORT ST. LUCIE FL 34953

7. Name and Address of New Registered Agent

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 \$550.00

After September 12, 2001 Fee will be \$750.00

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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Harold Jason Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/19/01
Date

561 337-3991
561 682-2362
Office Phone

CRE03 (5/01)



Attachment

P00000006080
A0040767

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

July 25, 2001

PRO-MOTION OF THE TREASURE COAST INC.
2709 SE GRAND DRIVE
PORT SAINT LUCIE, FL 34952

Subject: PRO-MOTION OF THE TREASURE COAST INC.

Reference Number: P00000006080

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

To be accepted by our bank, a check must be completed in its entirety. Both the numeric and written amounts must be completed.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/sa
ANNUAL REPORTS SECTION

I'm very sorry
per well

Promotions of Treasure Coast

Promotions Of The Treasure Coast ~ 2709 SE Grand Dr. ~ PT ST Lucie, Fla. 34952
Phone 561-692-2302 ~ Email Walkers@Peoplepc.com
C/O Aida Walker

Attachment 2
P00000006080

July 19, 2001

Division of Corporations
Uniform Business Report Filings
PO BOX 1500
Tallahassee, Fla. 32302-1500

To whom it may concern

This is a letter of explanation regarding receipt of mail at our business address. Per our conversation we just would like to inform you that we run out of several Kiosks and that mail operation do not provide us with a mailbox. Fortunately one of the employees in the main office recognized our name and held on to the second attempted mailing from your offices. Please use the above mentioned address for future use.

Enclosed please find our payment of \$150.00 as our account has been re-adjusted due to this missed mailing. Thank you for your time and patience regarding this event.

Sincerely,

Aida Walker

Aida Walker, Treasurer