

2001 UNIFORM BUSINESS REPORT (UBR)

4/21

FILED

May 18, 2001 8:00 am
Secretary of State

04-25-2001 90035 005 ***150.00

DOCUMENT # P00000012410

1. Entity Name
INNER QI, INC.

Principal Place of Business
PENTHOUSE A
2929 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL 33308

Mailing Address
PENTHOUSE A
2929 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL 33308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
531 E. McNAB RD
Suite, Apt. #, etc.
EAST

3. Mailing Address
531 E. McNAB RD
Suite, Apt. #, etc.
EAST

City & State
POMPANO BEACH, FL

City & State
POMPANO BEACH, FL

4. FEI Number
65-0979864

Applied For
Not Applicable

Zip
33060

Country
USA

Zip
33060

Country
USA

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

ROSENTHAL, DAVID
PENTHOUSE A
2929 EAST COMMERCIAL BLVD.
FORT LAUDERDALE FL 33308

Name
ROSENTHAL, DAVID
Street Address (P.O. Box Number is Not Acceptable)
531 E. McNAB RD
EAST
City
POMPANO BEACH FL Zip Code
33060

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

(NOTE: Registered Agent signature required when reinstating)

4/20/01
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 NAME STREET ADDRESS CITY-ST-ZIP	D CHANDLER, CAROL 2929 E. COMMERCIAL BLVD. PH A FORT LAUDERDALE FL 33308	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	531 E. McNAB RD POMPANO BEACH, FL 33060	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-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: CAROL CHANDLER *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01
Date

954-295-5316
Daytime Phone #

CR2E034 (10/00)