

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2001 8:00 am
Secretary of State

08-15-2001 90003 048 ***150.00

DOCUMENT # P00000017025

1. Entity Name
EUREE'S HERBS INC.

Principal Place of Business

341 SE AVE. E.
BELLE GLADE FL 33430

Mailing Address

341 SE AVE. E.
BELLE GLADE FL 33430

2. Principal Place of Business

341 SE AVE E
 Suite, Apt. #, etc.
Belle Glade

3. Mailing Address

341 SE AVE E
 Suite, Apt. #, etc.

City & State

FIA

City & State

Belle Glade FIA

Zip

33430

Country

Palm Beach

Zip

33430

Country

Palm Beach

4. FEI Number

65-0995108

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WALKER DOROTHY M
341 SE AVE. E.
BELLE GLADE FL 33430

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

TITLE ☐ Delete
NAME **President**
STREET ADDRESS **Loretta Gaines**
CITY-ST-ZIP **613 SW 3ST**
Belle Glade FIA 33430

TITLE ☐ Delete
NAME **Vice-President**
STREET ADDRESS **Lashawn Royals**
CITY-ST-ZIP **1113 Meadows Circle**
Boynton Beach FIA 33436

TITLE ☐ Delete
NAME **Secretary**
STREET ADDRESS **Euree Gaines**
CITY-ST-ZIP **613 SW 3ST**
Belle Glade FIA 33430

TITLE ☐ Delete
NAME **Treasurer**
STREET ADDRESS **Nathaniel Durand Lawrence**
CITY-ST-ZIP **218 N.W. 15 Street**
Belle Glade FIA 33430

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: LORETTA GAINES **8-8-01** **561-996-9929**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment DOC # P00000017085

A0081166

Loretta Gaines Your
341 S.E. Ave E.
Belle Glade Fla 33430
P561-996-9929

08-8-01

Dear to whom this may concern .I Loretta Gaines
the owner of Euree herbs INC at 341 S.E. Ave E
Belle Glade FLA 33430 561-996-9929 I didn't
receive a letter for you all to now it was the
second note I call in and told them that so they
told me to seen \$ 150.00 I am so sorry about the
miss up

Sincerely,

Loretta Gaines
Loretta GainesYour