

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90384 043 ***150.00

DOCUMENT # P00000026891

1. Entity Name

TULIP BAY, INC.

Principal Place of Business

**6051 SOUTHWEST 27TH STREET
 MIAMI FL 33155-3175**

Mailing Address

**6051 SOUTHWEST 27TH STREET
 MIAMI FL 33155-3175**

2. Principal Place of Business

7360 N.W. 34TH ST.

3. Mailing Address

C/O J A D & COMPANY, P.A.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3400 CORAL WAY, 6TH FL.

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

4. FEI Number

65-1006764

Applied For

Not Applicable

Zip

33122-1266

Country

U.S.A.

Zip

33145

Country

U.S.A.

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

**CARMONA, SANDRA L
 6051 SOUTHWEST 27TH STREET
 MIAMI FL 33155-3175**

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 \$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 **PSD** ☐ Delete
 NAME **CARMONA, SANDRA L**
 STREET ADDRESS **6051 SOUTHWEST 27TH STREET**
 CITY-ST-ZIP **MIAMI FL 33155-3175**

TITLE **V/S/D** ☒ Change ☐ Addition
 NAME **CARMONA-SANCHEZ, SANDRA**
 STREET ADDRESS **6051 SOUTHWEST 27TH STREET**
 CITY-ST-ZIP **MIAMI, FLORIDA 33155-3175**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P/T/D** ☐ Change ☒ Addition
 NAME **SANCHEZ, JAIME**
 STREET ADDRESS **6051 SOUTHWEST 27TH STREET**
 CITY-ST-ZIP **MIAMI, FLORIDA 33155-3175**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: *Jaime Sanchez* /PRESIDENT-DIRECTOR 4/2/01 (305) 477-2262

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)