

FOR PROFIT CORPORATION

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

May 17, 2002 8:00 am
Secretary of State

05-17-2002 90033 042 ***150.00

DOCUMENT # P00000035721

1. Entity Name

SOLAR TAN, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

882 N. FEDERAL HWY.

Suite, Apt. #, etc.

3. Mailing Address

882 N. FEDERAL HWY.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

POMPANO BEACH, FL

City & State

POMPANO BEACH, FL

4. FEI Number

65-0996276

Applied For

Not Applicable

Zip

Country

33062 BROWARD

Zip

Country

33062 BROWARD

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

ELVIRA P. ROWLAND

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

882 N. FEDERAL HWY.

City

POMPANO BEACH

FL

Zip Code

33062

DO NOT WRITE
IN THIS SPACE

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

Elvira Rowland

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

(NOTE: Registered Agent signature required when reinstating)

4/27/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DIPT/ST
ELVIRA P. ROWLAND
882 N. FEDERAL HWY.
POMPANO BEACH, FL 33062

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

Elvira Rowland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/02

Date

954-784-6433

Daytime Phone #