

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91503 001 \*\*\*150.00

**DOCUMENT # P00000045753**

1. Entity Name  
**S & G ENTERPRISES OF SOUTH FLORIDA, INC.**

Principal Place of Business  
**7770 N.W. 50TH ST., #205  
LAUDERHILL FL 33351**

Mailing Address  
**7770 N.W. 50TH ST., #205  
LAUDERHILL FL 33351**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1014009**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

**TANKHELSON, SIMION  
7770 N.W. 50TH ST., #205  
LAUDERHILL FL 33351**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

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, 2002 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

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D TANKHELSON, SIMION 7770 N.W. 50TH ST., #205 LAUDERHILL FL 33351</b> <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 my address, with all other lists empowered.

**SIGNATURE:**

*(Signature of Simion Tankhelson)*  
**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Date

Daytime Phone #

**5/04/02**

CR2E034 (9/01)

S & G Enterprises of South Florida

Attachment  
# 900005045753  
5/04/02  
701000

To the Department of State's Division of Corporations:

I'm very sorry for the delayed payment, because I happened to be out of town the time the bill was sent to me. I ask that you please not charge me the late payment fee, as it will never happen again. This is only my second payment thus far and I didn't know the exact date on which I was supposed to receive the bill so that I could have taken care of it some other way before the deadline. Thank you.

Truly Yours,  
Simion Tankhelson

