

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 23, 2001 8:00 am
Secretary of State

05-23-2001 91191 033 ***150.00

DOCUMENT # **P0000000 46170**

1. Entity Name:
Mini Modal Corporation

Principal Place of Business

Mailing Address

P.O. Box 187
Port St. Joe, Fl. 32457

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59 3644987

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Karen Lawrence
220 Buccaneer Dr.
Port St. Joe, Fl. 32456

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 **Karen Lawrence, Karen Lawrence, Secretary/Treas. 5/10/01**

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!!
After MAY 1, 2001
Make Check Payable

FEE IS \$150.00
Fee will be \$550.00
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	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

President
James Lawrence
220 Buccaneer Dr.
Port St. Joe, Fl. 32456

Secretary/Treasurer
Karen Lawrence
220 Buccaneer Dr.
Port St. Joe, Fl. 32456

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: **Karen Lawrence - Karen Lawrence 5/10/01 850-647-2923**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)



Attachment
D#P000004670
AW71718...

P.O. Box 87, Port St. Joe, Florida, 32457 (850)647-2923

May 15, 2001

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

To Whom It May Concern,

As this is our first year filing the UBR, we did not receive a current one with our pre-printed information on it. Several times I requested a blank form, both from the internet website and the 1-800 phone number but never received it. I tried to file online, but did not have the appropriate numbers required. Finally on April 30, I spoke with a Mr. Blankenbaker who did get the blank forms in the mail to me and also directed me to write this letter requesting a waiver of the \$400.00 fee due to extenuating circumstances of which I had no control. Thank you for your time, I look forward to your response.

Sincerely,

Karen Lawrence
Corporate Sec/Treasurer