2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P00000078454

1. Entity Name TEHI, INC.



Principal Place of Business

Mailing Address

			Name			
6. N	ame and Address of Co	irrent Registered Agent				
Zip 、•	Country	Zip	Country			
City & State		City & State				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
2. Principal Place of Business		3. Mailing Address	•	į		
27751 LAKE JEM ROA MOUNT DORA FL 3275	=	27751 LAKE JEM ROAD MOUNT DORA FL 32757				

FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90040 019 ***150.00

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MOUNT DORA FL 32757 MOUNT DORA FL 32757									
2. Principal Place of Business 3. Mailing Ad		Address				! 11 111 16 111 10 111 10	10) (1)(() 0(0)) (ilin bibi iabi	
Suite, Apt. #, etc. Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State City & State					Number 59-36660	92		olied For Applicable	
Country	Zíp	Coun	Country		tificate of Status Desire				
6. Name and Address of Current Registered Agent				7, Nan	ne and Address of Ne	w Registered A	gent		
ALD A			Name Street Addres	ss (P.O. Box	Number is Not Accepta	able)			
						. .	· · · · · ·		
MOON DOLL 12 32/3/			City		M 110	FL	Zip Code)	
d entity submits this statement f registered agent.	for the purpose of changi	ing its registere	ed office or regis	stered agent	, or both, in the State of	f Florida. I am fa •	amiliar with, a	and accept	
re, typed or printed name of registered age	ent and title if applicable.	(NOTE: Registere	d Agent signature requ	uired when reinsta	ating)	DATE			
			·					O-May Be — to Fees	
				ADDI	TIONS/CHANGES TO	OFFICERS AND	DIRECTORS	3 IN 11	
GINLEY, COLLEEN A 51 LAKE JEM RD JNT DORA FL 32757	□ Delete	NAM STRE	e Et address				Change	☐ Addition	
OEN, RONALD A 51 LAKE JEM RD. UNT DORA FL 32757	□ Delete	NAM STRE	ET ADDRESS				☐ Change	Addition	
	□ Delete	NAM STRE	EET ADDRESS				☐ Change	☐ Addition	
_	☐ Delete	NAM STRI	EET ADDRESS				Change	Addition	
	☐ Delete	NAM STRI	EET ADDRESS				Change	Addition	
<u>.</u>		NAM Stri City	EET ADDRESS '-ST-ZIP				☐ Change	Addition	
	Country Name and Address of Curre ALD A M ROAD FL 32757 d entity submits this statement registered agent. re, typed or printed name of registered ag IOW!!! FEE IS \$150.00 1, 2003 Fee will be \$550.0 able to Florida Department OFFICERS AN GINLEY, COLLEEN A 51 LAKE JEM RD JNT DORA FL 32757 OEN, RONALD A 51 LAKE JEM RD. JNT DORA FL 32757	Suite, Apt. #, etc. City & State Country Zip Name and Address of Current Registered Agent ALD A M ROAD FL 32757 d entity submits this statement for the purpose of change in registered agent. IOW!!! FEE IS \$150.00 1, 2003 Fee will be \$550.00 able to Florida Department of State OFFICERS AND DIRECTORS CINLEY, COLLEEN A 51 LAKE JEM RD JINT DORA FL 32757 Delete Delete Delete Delete Delete Delete Delete Delete Delete	Business 3. Mailing Address Suite, Apt. #, etc. City & State Country Zip Country Name and Address of Current Registered Agent ALD A MROAD FL 32757 d entity submits this statement for the purpose of changing its registered registered agent. (NOTE: Registere registered agent and title if applicable. (NOTE: Registere low) (NOTE: Re	Suite, Apt. #, etc. Country	Suite, Apt. #, etc. City & State	Business 3. Mailing Address CHECK HE	Business 3. Mailing Address Circumity Check Herie IF Making Country Country Country Country S. Certificate of Status Desired Registered Agent Country S. Certificate of Status Desired Registered Agent Registered Registered agent Registered agent Registered Registered agent Registered Registered Registered Registered agent Registered Reg	Business 3. Mailing Address Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES April Country Zp Country Sp. Certificate of Status Desired Sp. 75 Add Fee Required Sp. 75 Add Fee Require	

I nereby certify that the information supplied with this fining does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 frustee empoweled tojekecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. of the corporation or the receiv changed, or on an attachment

SIGNATURE: