

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000079565

1. Entity Name

NUWAI FAMILY SERVICES, INC.

FILED

Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90433 012 ***158.75

Principal Place of Business

13650 NW 4 STREET APT 206
PEMBROKE PINES FL 33028

Mailing Address

13650 NW 4 STREET APT 206
PEMBROKE PINES FL 33028

2. Principal Place of Business

1661 NW 113th Avenue

3. Mailing Address

1661 NW 113th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

4. FEI Number

65-1035038

Applied For

Not Applicable

Zip

33026

Country

U.S.A.

Zip

33026

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HUTCHINSON, HARLEEN
13650 NW 4 STREET APT 206
PEMBROKE PINES FL 33028

7. Name and Address of New Registered Agent

Name Hutchinson, Harleen

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

1661 NW 113th Avenue

City

Pembroke Pines, FL

Zip Code

33026

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

Harleen Hutchinson

3-30-01

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!!! 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

TITLE D ☐ Delete
NAME HUTCHINSON, HARLEEN
STREET ADDRESS 13650 NW 4 STREET APT 206
CITY-ST-ZIP PEMBROKE PINES FL 33028

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Hutchinson, Harleen ☒ Change ☐ Addition
NAME
STREET ADDRESS 1661 NW 113th Avenue
CITY-ST-ZIP Pembroke Pines, FL 33026

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Harleen Hutchinson CEO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-01 (954) 322-5404

Date

Daytime Phone #

CR2E034 (10/00)