

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 10, 2003 8:00 am
Secretary of State

DOCUMENT # P00000082598

1. Entity Name

TAFJAM USA, INC

09-10-2003 90059 023 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1538 CARDINAL WAY

Suite, Apt. #, etc.

3. Mailing Address
1538 CARDINAL WAY

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
WESTON, FLORIDA

City & State
WESTON, FLORIDA

4. FEI Number
65-1041289

Applied For
Not Applicable

Zip
33327

Country
USA

Zip
33327

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
JULIE RIETTIE

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

1538 CARDINAL WAY

City
WESTON

FL

Zip Code
33327

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

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) ☐

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
PT
JULIE RIETTIE
1538 CARDINAL WAY
WESTON, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VS
DARRIN RIETTIE
1538 CARDINALWAY
WESTON, FL 33327

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JULIA RIETTIE SEPT 3'03 954-232-776

Attchment
80146128

Miami, September 3, 2003

**Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314**

**Re: TAFJAM USA, INC.
Doc Number P00000082598**

Dear Sir or Madam:

Please find enclosed an application for reinstatement with our new address.

We have never received the 2002 Uniform Business Report. We think it was sent to a different location.

We are enclosing a check for \$150 to cover the following fees:

2002 Uniform Business Report

We want to ask you for consideration and waive the penalty for reinstatement of our organization, which was incorporated in 2000.

Your consideration will be greatly appreciated.

Sincerely,

**Julie Riettie
President
1538 Cardinal Way
Weston, FL 33327**