

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jun 19, 2001 8:00 am
Secretary of State

06-19-2001 90007 030 ***158.75

DOCUMENT # P00000102916

1. Entity Name

ANGEL HANDS, INC.

Principal Place of Business

**11965 SOUTHWEST 270TH STREET
HOMESTEAD FL 33032**

Mailing Address

**11965 SOUTHWEST 270TH STREET
HOMESTEAD FL 33032**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1053744

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

B. 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) ☒**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
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
TINSLEY, VANESSA G
11965 SOUTHWEST 270TH STREET
HOMESTEAD FL 33032** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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:

Vanessa G. Tinsley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

29 Apr 2001

305 258-7803

Date

Daytime Phone #

Attachment
A0073758

P 00000102916

Vanessa G. Tinsley
Angel Hands Inc.
11965 Southwest 270 Street
Homestead, Fl 33032

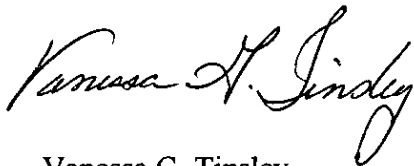
14 June 2001

RE: 2001 Uniform Business Report document # P00000102916

To Whom It May Concern:

Thank you for your assistance via telephone this morning. As per your instructions I am enclosing a copy of the 2001 UBR and a replacement check in the amount of \$158.75. The original report was completed April 29 and mailed on April 30, 2001. As of today I have not received the certificate of status and your agent did not find record of our filing. In accordance with our conversation, I respectfully request that you waive the late filing fee and accept the enclosed copy of the original document (to which I have added an original signature). Your consideration in this matter is greatly appreciated.

Sincerely,



Vanessa G. Tinsley

2 enclosures