

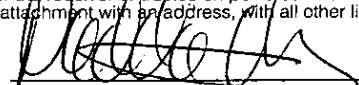
2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State

05-22-2001 90637 047 ***150.00

DOCUMENT # P00000103149 1. Entity Name TYN ONE INC. D/B/A DOLLAR 4 U			
Principal Place of Business 10417 NW 41 STREET MIAMI, FLORIDA 33178		Mailing Address 2750 NE 183 STREET MIAMI, FLORIDA 33160	
2. Principal Place of Business 10417 NW 41 STREET Suite, Apt. #, etc.		3. Mailing Address 2750 NE 183 STREET Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State MIAMI, FL	
Zip 33178		Zip 33160	
Country USA		Country USA	
4. FEI Number 65-1053390			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent EDWARD J. ABRAMSON, ESQ. AIRPORT EXECUTIVE TOWER 2 7270 NW 12 ST, SUITE 580 MIAMI, FL 33126		7. Name and Address of New Registered Agent 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 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. ☒		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	
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		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.	

CR2E034 (11/00)

SIGNATURE:  **NADEZHDA MORENO** **05-16-01** **305-332-4075**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #