

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90109 026 \*\*\*150.00

**DOCUMENT # P00000106727**

1. Entity Name

**COLE DIVERSIFIED, INC.**

Principal Place of Business

1007 N. FEDERAL HWY., #29  
 FT. LAUDERDALE FL 33304-1422

Mailing Address

1007 N. FEDERAL HWY., #29  
 FT. LAUDERDALE FL 33304-1422

**C0064175**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1800 S.W. 11th St  
 Suite, Apt. #, etc.

3. Mailing Address

1007 N. Federal Hwy #29  
 Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL 33304

4. FEI Number

Applied For

☒ Not Applicable

Zip

33312

Country

United States

Zip

33304

Country

United States

5. Certificate of Status Desired

☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TRANTALIS, DEAN J ESQ.  
 1007 N. FEDERAL HWY., #29  
 FT. LAUDERDALE FL 33304-1422

7. Name and Address of New Registered Agent

Name

Steve Hamby

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

1800 S.W. 11th St

City

Ft. Lauderdale

FL

Zip Code

33312

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

Steve Hamby

4/29/01

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 PD  
 NAME HAMBY, STEVEN  
 STREET ADDRESS 1007 N. FEDERAL HWY., #29  
 CITY-ST-ZIP FT. LAUDERDALE FL 33304-1422

TITLE STD  
 NAME WILLIAMS, ELAINE H  
 STREET ADDRESS 1007 N. FEDERAL HWY., #29  
 CITY-ST-ZIP FT. LAUDERDALE FL 33304-1422

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steve Hamby

Date

Daytime Phone #

4/29/01

CR2E034 (10/00)