

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**  
 05-28-2002 91627 036 \*\*\*150.00

**DOCUMENT # P01000013302**

1. Entity Name  
**BABIES, BIRTH & BEYOND, INC.**

Principal Place of Business  
**11771 ROYAL PALM BOULEVARD**  
**UNIT 102**  
**CORAL SPRINGS FL 33065**

Mailing Address  
**11771 ROYAL PALM BOULEVARD**  
**UNIT 102**  
**CORAL SPRINGS FL 33065**

2. Principal Place of Business  
**9678 Royal Palm Blvd.**  
 Suite, Apt. #, etc.

3. Mailing Address  
**9678 Royal Palm Blvd.**  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
**Coral Springs FL**  
 Zip  
**33065**  
 Country  
**USA**

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**Coral Springs FL**  
 Zip  
**33065**  
 Country  
**USA**

4. FEI Number ☒ 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

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) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 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	<b>PTD</b> <b>STEINBURG, KIMBERLY B</b> <b>11771 ROYAL PALM BOULEVARD</b> <b>CORAL SPRINGS FL 33065</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVD</b> <b>JOHNSON, LISA M</b> <b>11771 ROYAL PALM BOULEVARD</b> <b>CORAL SPRINGS FL 33065</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTD</b> <b>STEINBERG, KIMBERLY B</b> <b>9678 Royal Palm Blvd.</b> <b>Coral Springs, FL 33065</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SVD</b> <b>JOHNSON, LISA M</b> <b>9678 Royal Palm Blvd.</b> <b>Coral Springs, FL 33065</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:** *Lisa M Johnson* **REQUIRED**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5-13-02 (954) 346-7163**  
 Date Daytime Phone #

CR2E034 (9/01)

Attachment

**BABIES, BIRTH & BEYOND, INC.**

436115  
# B1000013302

9678 Royal Palm Blvd.  
Coral Springs, FL 33065  
Office (954) 684-1485 Pager (954) 365-3135

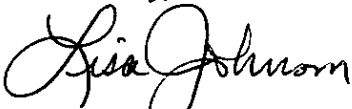
Florida Department of State  
Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

May 13, 2002

To Whom It May Concern:

This is a letter of request by the partners of the corporation, Babies, Birth & Beyond. We are writing to appeal to you and ask for grace for the untimely filing of this document, which would normally incur an additional fee. Unfortunately, this form was placed in our files along with another form which was due to be sent out by the 15<sup>th</sup> of May, causing us to overlook the deadline of May 1<sup>st</sup> for the Uniform Business Report. We humbly make this appeal for mercy in regards to the late fee, as our company consists of two mothers who are currently inactive in our business, due to personal family situations, but would like to maintain our corporation for the near future. The additional fee at this point would, quite frankly, force us to go out of business, as we would have no choice but to allow the corporation to dissolve. If you would please accept this original payment amount at this time, we would be very grateful. Thank you for your consideration in this matter.

Sincerely,



Lisa Johnson & Kimberly Steinberg

