

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

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91611 010 ***150.00

DOCUMENT # P01000017960

1. Entity Name

SGU Merchandise, Inc

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4532 W. Kennedy Blvd.

Suite, Apt. #, etc.

414

City & State

Tampa FL

Zip

33609

Country

3. Mailing Address

4532 W. Kennedy Blvd.

Suite, Apt. #, etc.

414

City & State

Tampa FL

Zip

33609

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

944338994

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Joanie Pepper

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

4532 W. Kennedy Blvd #414

City

Tampa

FL

Zip Code

33609

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

Joanie Pepper

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/19/2002

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

Joanie Pepper President
4532 W. Kennedy Blvd #414
Tampa, FL 33609

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:

Joanie Pepper

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/19/2002

Daytime Phone #

CR2E034B (12/01)