

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

FILED

02 OCT 28 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000024720

1. Entity Name

TELEPORTCHESTER, CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2310 W WATERS AV

3. Mailing Address
2310 W WATERS AV

Suite, Apt. #, etc.
SUITE H

Suite, Apt. #, etc.
SUITE H

City & State
TAMPA FL

City & State
TAMPA FL

Zip
33604

Country
USA

Zip
33604

Country
USA

4. FEI Number
59-3701291

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name RUBEN MOSQUERA

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

3350 W HILLSBOROUGH AV. APT 318

City TAMPA

FL

Zip Code
33614

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.

(NO IL: Registered Agent signature required when reconstituting)

10/24/02

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 \$81.25
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

DPST - RUBEN MOSQUERA
3350 W HILLSBOROUGH AV. APT. 318
TAMPA FL 33614

TITLE
NAME
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CITY - ST - ZIP

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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/02 (813) 915-1549

Date

Daytime Phone #

CR2E034B (12/01)

20 11/4/02

Tampa October 24, 2002

FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 1500
Tallahassee FL 32302-1500

Ref: Uniform Business Report Correction - P01000024720 – Teleportchester, Corp.

The purpose of this letter is to ask you to kindly waive the penalty charges caused by the misfiling status of the UBR form for the corporation mentioned in reference.

Our petition and best understanding briefly and shortly is as follow. Recently we received a notice of administrative dissolution or revocation from you in regards the corporation referenced above, asking us to fill the form and to pay US\$ 750 in penalty because the misfiling status. The original UBR was sended to you on April 30 with the correspondent company check. You cleared this check on May 22 (attached photocopy). That same day the dissolution/revocation notice was received, we call the eight hundred number in the back of the front page of the form and your representative told us that the problem was the missing information of the members of the board. Please find out this completed information in the attached UBR form downloaded from your Web site.

Because of the reasons explained to you in the previous paragraph, we ask for your benevolence in waiving the charges presented to us in your last notification, supported on the lack of cross information we had during the period since we file the original UBR on April 30, 2002, respectfully yours,


Ruben Mosquera